

Shipper's Name and Address CESANA SHLOMO GICHON 18 JERUSALEM	Shipper's Account Number	Not Negotiable Air Waybill Lufthansa Cargo AG Frankfurt Airport, Germany Member of I.A.T.A. Issued by
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Consignee's Name and Address CESANA MICHAL SOMER 1347 DARTMOUTH LANE DEERFIELD 60015 Illinois USA	Consignee's Account Number	It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation at liability by declaring a higher value for carriage and paying a supplemental charge if required.
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Issuing Carrier's Agent Name and City ALLCARGO LOGISTIC SERVICES LTD 3 HASHARON ST. 7019900 AIRPORT CITY ISRAEL	Accounting Information CUSTOMS CLEARANCE INTERNATIONAL 433AIRPORT BLVD , SUITE 403 BURLINGAME ,ca .9010 t:650-952-3803 e:natalie.jackson@gallaghertransport
Agent's IATA Code 37-4-7102	Account No.

Airport of Departure (addr. of First Carrier) and Requested Routing Tel-Aviv		Reference Number	Optional Shipping Information
To FRA	By First Carrier Lufthansa Cargo AG	Routing and Destination ORD LH	Currency USD
Airport of Destination Chicago Ohare,il	Requested Flight/Date 8345/2707	Requested Flight/Date 0432/2807	Declared Value for Carriage NVD
Handling Information ENVELOPE ATTACHED MARKS AND NUMBERS HS Code:63090009		Amount of Insurance X X X	Declared Value for Customs NCV

INSURANCE . If carrier offers Insurance, and each Insurance is requested in accordance with the conditions thereof, indicate amount to be insured in figures in box marked "Amount of Insurance".

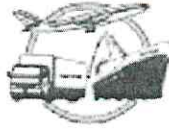
(For USA only): These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to USA law prohibited.

No. of Pieces RCP	Gross Weight	kg/lb	Rate Class	Chargeable Weight	Rate	Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
5	258.00	K	Q	337.50				USED PERSONAL EFFECTS HS CODE 63090009 2nd notify ALLIED INTERNATIONAL SAN FRANCISCO 3146 CORPORATE PLACE HAYWARD ,CA 94545 T:510-760-7364 TRACY@AISFO.COM MARIE@AISFO.COM DIM: 5(90X60X75)CMS AS VOL 337.500 KGS 2.0250 CBM Inv.No:307255
5	258.00							

Prepaid	Weight Charge	Collect	Other Charges
Valuation Charge			Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains dangerous goods, such part is properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations. ALLCARGO LOGISTIC SERVICES LTD /ofer Haran REF:86757 JOB:102393
Tax			
Total Other Charges Due Agent			
Total Other Charges Due Carrier			
Total Prepaid		Total Collect	
Currency Conversion Rates		CC Charges in Dest. Currency	
For Carriers Use only at Destination		Charges at Destination	Total Collect Charges

Signature of Shipper or his Agent
27.07.23 Tel-Aviv
ALLCARGO LOGISTIC SERVICES LTD

Signature of Issuing Carrier or its Agent



A. UNIVERS TRANSIT LTD.

Because we care...

PACKING INVENTORY

Shipper Name: Michal Cesana
 Packing Job Date: 11 Jul 2023
 Origin Address: Israel
 Destination Address: United States



Packed Items

Package#	Item	Comment	Wrapping	Room
1	Pillows		Medium Box	-----
	Linen			
2	Shoes		Medium Box	-----
	Clothes			
3	Pillows		Medium Box	-----
	Linen			
4	Clothes		Medium Box	-----
	Pillows			
5	Linen		Medium Box	-----
	Clothes			
5	office		Medium Box	-----
	Computer Monitor	Dell 08jm		
	Linen			

Total Number of Packages: 5

Used Boxes Count

Box Type	Quantity
Medium Box	5

Shipper Signature on packing

Shipper: Michal Cesana

Foreman Signature on packing

Foreman: max glazer

A. Univers Transit Ltd.

Shipper Signature on delivery

Name: _____

Date _____

Delivery Driver Signature

Name: _____

Company: _____