Shipper			Т			
LEVRAN DAFNA			HOUSE BILL OF LADING # 307901			
GOLDA MEIR 1/25						
HOD HA SHARON			I Manager Manager		NSIT LTD.	
			I wante assures somet const.	on action thanboat with	*****	k
			ASHDOD			
 G =			TEL: 972-8-8			10011 01.150012 01.15101 1000. 76
Consignee————— LEVRAN DAFNA			Web-Site:	www.uni	vers-trans:	it.co.il
90 Westervelt PL,			DECETTED :-			5
Cresskill, 07626, 1	NT.T		RECEIVED in condition e			
U.S.A	,		the total n	-		
			other packa			
			below.	des or	unics enume	staced
Notify	*		DC2OW.			
STRAND FREIGHT SYS	TEMS		FOR DELIVER	Y PLEASI	E APPLY TO:	
5 WEST SHELTON TER						
HILLSIDE, NJ 07205			STR & SL CO	RP (STR	AND)	
STRANDSHIPPINGLOGI		MAIL.COM	5 WEST SHEL			
EIN 112595015			HILLSIDE, N	J 07205		
Vessel	P	ort-of-Load	EIN 1125950	15		
VELA	11 2	ASHDOD	+1-908-258-	7983		
-Port-of-Discharge-						
NEW YORK, NY			+1-908-258-	7982		
 m:						_ ,_
Final-Destination-	777		4	5:11		-Org/Cpy-
	E	reight payable ORIGIN\ PP	e at	BITTS	of Lading:	COPY
		ORIGIN (PP				
Marks & Numbers	Number	Kind	Descr. of G	oods	Weight	Volume
LEVRAN DAFNA	4	PACKAGES	70 PACKAGES		1,106	13.53
			USED HOUSEHOL	תססם תי	1,100	10.00
			STUFFED INTO			
			TCLU4152864	00-1		
			SEAL: 205			
			Province and a second control of the			
			EXPRESS WAYB	CLL		
			HS CODE: 940	3.10		
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				B# 5		The state of the s
		S#				The state of the s
TOTAL	,			PR 0 PP -	T T C C C C C	
TOTAL	4			TOTAL	1,106.00	13.53
Remarks :						
						1
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			19/01,	25	A. UNIVERS	TRANSIT
				-		
			19/01/ ———————————————————————————————————	-	A. UNIVERS	

Issuing Post Name

TEL AVIV

20242696610001

isa Type /Class

Control Number

Surname

LEVRAN

mol of

DAFNA Given Name

Passport Number 41174839

Entries

Annotation

26SEP2024

Issue Date

P/A: LEVRAN. MAOR

PN-SLICE GLOBAL INC

P#-SRC2426250457

Expiration Date 24SEP2028

Nationality

ISRL

Birth Date

20AUG1981

U3626592

PED-31AUG2025

41174839<91SR8108201F2809241L2TLV21T6J143278

PASSPORT 11277

Type / in



Holder's all paters / 107 Tar La Carrette

Authority I'C Passport

JERUSALEM

Surramo PII

SSR

STATE OF ISRAEL SNOW ממל חמוד עה / ממצא לי שמכול Passport No. / 1011 pn JUNIS

41174839

מה משפתה

שם פרטי

1011 MILLING

ישראלית

LD. No. / 1/1/10 200

0-4318306-0 מקום לידה

ישראל

Data of explry / your north property 14/08/2034

סמכות - מסונה דרכונים ג ירשלים

Date of issue / TREATS TOTAL 20/08/1981 15/08/2024 F/) ISPAEL Date of With / 2775 Nationality Given name ISPAR.

41174839<9ISR8108201F34081460<4318306<0<<<36



PACKING INVENTORY

Shipper Name: Packing Job Date: LEVRAN DAFNA

24 Dec 2024

Origin Address: Destination Address:

Israel United States



Packed Items

Package#	Item	Comment	Wrapping	Room
1	Kitchenware		Book/Small Box	
2	Kitchenware		Book/Small Box	
3	Kitchenware		Book/Small Box	
1	Kitchenware		Book/Small Box	
5	Kitchenware		Book/Small Box	
3	Kitchenware		Book/Small Box	
7	Kitchenware		Book/Small Box	
3	Kitchenware		Book/Small Box	
9	Kitchenware		Book/Small Box	
10	Kitchenware		Book/Small Box	
11	Kitchenware		Book/Small Box	
12	Kitchenware		Book/Small Box	
13	Kitchenware		Book/Small Box	
14	Kitchenware		Book/Small Box	
5	Kitchenware		Book/Small Box	
16	Kitchenware		Book/Small Box	
17	Kitchenware		Book/Small Box	<u></u>
8	Kitchenware		Book/Small Box	
9	Kitchenware		Book/Small Box	
20	Camping Equipment		Wrapped	
21	Vacuum Cleaner		Wrapped	
22	Clothes		Medium Box	
3	gym equipment		Wrapped	
!4	gym equipment		Wrapped	
:5	garden items		Wrapped	
26	Chair, Arm		Wrapped	
7	garden sofa		Wrapped	1
28	chair parts		Wrapped	
29	End Table		Wrapped	
30	chair parts		Wrapped	
31	Chair, Arm		Wrapped	

-	3					
28	chair parts		-	Wrapped		
29	End Table		***	Wrapped		
30	chair parts			Wrapped	• 1	
31	Chair, Arm			Wrapped		
	ature on packing	Foreman Signature on packing	Shipper Signature on delivery	Delivery l	Driver Signature	
Shipper:LE	EVRAN DAFNA	Foreman: Gil Wanderman AUT	Name:	Name:		
25 Dec 20	24	A. Univers Transit Ltd.	Date	Company	/:	



32	Chair, Arm	Wrapped	
3	Mirror	Wrapped	
4	Decorations	Wrapped	<u> </u>
5	Decorations	Wrapped	
6	Clothes	Medium Box	
7	Clothes	Medium Box	
38	Clothes	Medium Box	
9	Clothes	Medium Box	-
0	Clothes	Medium Box	
1	Clothes	Medium Box	
12	Clothes	Medium Box	
13	Clothes	Medium Box	
14	Clothes	Medium Box	
15	Clothes	Medium Box	
16	Bathroom items	Medium Box	
17	Books	Book/Small Box	
18	shelfs	Wrapped	
19	Clothes	Medium Box	
50	Clothes	Medium Box	
51	tools	Wrapped	
52	tools	Wrapped	
53	Toys	Large Box	
54	Toys	Large Box	
55	Toys	Large Box	
56	Camping Equipment	Wrapped	
57	tools	Wrapped	
58	tools	Wrapped	
59	Camping Equipment	Wrapped	
30	Camping Equipment	Wrapped	
61	Camping Equipment	Wrapped	
32	Camping Equipment	Wrapped	
63	Camping Equipment	Wrapped	
64	Camping Equipment	Wrapped	
35	Camping Equipment	Wrapped	
36	Bicycle	Wrapped	
37	Bicycle	Wrapped	
88	Bicycle	Wrapped	
69	Bicycle	Wrapped	
70	Bicycle	Wrapped	

Total Number of Packages: 70

Shipper Signature on packing	Foreman Signature on packing	Shipper Signature on delivery	Delivery Driver Signature	
		L	<u> </u>	
Shipper:LEVRAN DAFNA	Foreman: Gil Wanderman AUT	Name:	Name:	
25 Dec 2024	A. Univers Transit Ltd.	Date	Company:	



Used Boxes Count

Box Type	Quantity
Book/Small Box	20
Large Box	2
Medium Box	14
Large Box	1
Wrapped	33

Shipper Signature on packing	Foreman Signature on packing	Shipper Signature on delivery	Delivery Driver Signature	
Shipper:LEVRAN DAFNA	Foreman: Gil Wanderman AUT			
	- Indiman //or	Name:	Name:	

25 Dec 2024

A. Univers Transit Ltd.

Company:__

U.S.A. Customs Clearance Documents

The attached set of documents consists of three different forms. First of all, separate the three forms, and then carefully fill them in, paying attention to the notes given below. If you do not fully complete these forms, your goods will not clear Customs, and you may be charged for storage at destination.

Power of Attorney

This form empowers the destination agent to act for you as Customs broker, and to make statements and Customs entries on your behalf. (See also note at bottom of section on completing Customs form 3299).

- Please complete the sections marked (X).
- Leave blank the spaces for naming the Customs broker, Customs district and duration of the validity of the form. These details
 will be entered by the destination agent.
- Don't forget to sign, date, and have the form witnessed.

Customs form 3299

This form is your declaration requesting free entry of your personal effects. The form may seem complicated to begin with, but if you take your time and follow these instructions, you will find it fairly simple to complete. The form is divided into seven sections, numbered Part I through to Part VII.

- Part I Complete boxes 1 to 7. It is important that you fill boxes 3 (date you arrived/will arrive); 5 (airport or place where you arrived/will arrive); and 6 (airline and flight number) correctly. The information you put in these boxes refers to your own arrival, not the arrival of your goods. Box 8 sections A to F refers to the arrival of your goods. As you will not have the necessary information to complete this part, you may leave Box 8 sections A to F blank for the destination agent to complete.
- Part II Fill in Box 9, putting an 'X' in the check-box against 'is' if you are moving temporarily to the US, or in the check-box against 'was' if you are moving permanently. Fill in the boxes marked A (name of country); B (length of time); and C (Residency status on arrival) with the relevant information. In Box 10, note that residents of the U.S. should complete parts A and B; non-residents should complete parts A and C. Put an 'X' in each applicable check-box.
- Part III This part applies only to 'US Personnel and Evacuees.' Complete it only if you are a member of the US Military or a US Government employee, moving on US Government orders. Otherwise, leave this part blank.
- Part IV Section A applies to all importers. If you have any of the items listed by check-boxes 1 to 6, please put an 'X' in the appropriate box. US residents then go on to enter an 'X' against each applicable check-box in sections B and C. Importers who are non-residents must complete section B, but not section C. Turn the page now to section D where you list any items that you indicated to be in your shipment in sections A, B, or C. It is not necessary to list here any items which you have owned and used for over a year, as long as these items are detailed on your packing list (for owner-packed shipments) or on your inventory (for household removals).
- Part V The destination agent will complete the 'Name of carrier' and 'Signature of Agent' boxes
- Part VI Put an 'X' in the 'Importer' check box, sign the form in box 2, and date it in box 3.
- Part VII Leave blank. This is for Customs' use only.

Note: You may notice that at the bottom of part VI, it is stated that an 'Authorised agent' may complete the form. This is why it is important that you complete the first form, the Power of Attorney. In completing the Power of Attorney, you empower the destination agent to complete any parts you may have missed or filled in incorrectly, using information received from you by mail, fax or telephone.

Treasury Department Supplemental Declaration

On this form, you give details of your passport number, Social security number (if applicable) and brief details of your reason for moving to the United States.

- Enter the correct information in each section. You may leave blank section 16 (Shipment itinerary) the destination agent will
 have the information to complete this section. Enter 'N/A' if due to your circumstances a particular section is not applicable to
 you or your shipment.
- Ensure that you sign the form.

You must now attach to these documents a <u>passport photocopy</u>, specifically the page with your picture and personal details, and the page with your US Visa (if applicable). You must also complete and attach a <u>packing list</u> (for owner-packed shipments), <u>or a numbered inventory</u> which the packers will complete if yours is a professionally-packed household removal.

POWER OF ATTORNEY - to clear my personal effects shipment through U.S. Customs

Section 141.5, Title 19, United States Code of Federal Regulations requires a Customs House Broker to obtain a valid Power of Attorney before transacting business in the name of his principal (Importer of Records).

To expedite clearance of your shipment and to comply with U.S. Customs regulations, please complete the information as requested below (X).

KNOW ALL MEN BY THESE PRESENTS: That, (X) Dafna Levran
(Full name of Shipper)
Residing at (X) 90 Westervelt PL, NJ 07626, US
(U.S. Address)
hereby constitutes and appoints the following Customs House Broker:
as a true and lawful agent and attorney of the grantor named above for and in the name, place, And stead of said grantor from this date and in all Customs Districts, and in no other name, to make, endorse, sign, declare, or swear to any entry, withdrawal, declaration, certificate, bill of lading, carnet or other document required by law or regulation in connection with the importation, transportation, or exportation of any merchandise shipped or consigned by or to said grantor; to perform any act or condition which may be required by law or regulation in connection with such merchandise; to receive any merchandise deliverable to said grantor;
To make endorsements on bills of lading conferring authority to transfer title, make entry or collect drawback, and to make, sign, declare, or swear to any statement, supplemental statement, schedule, supplemental schedule, certificate of delivery, certificate of manufacture, certificate of manufacture and delivery, abstract of manufacturing records, declaration of proprietor on drawback entry, declaration of exporter on drawback entry, or any other affidavit or document which may be required by law or regulation for drawback purposes, regardless of whether such bill of lading, sworn statement, schedule, certificate, abstract, declaration, or other affidavit or document is intended for filing in any customs district;
To sign, seal, and deliver for and as the act of said grantor any bond required by law or regulation in connection with the entry or withdrawal of imported merchandise or merchandise exported with or without benefit of drawback, or in connection with the entry, clearance, lading, unlading or navigation of any vessel or other means of conveyance owned or operated by said grantor, and any and all bonds which may be voluntarily given and accepted under applicable Laws and regulations, consignee's and owner's declarations provided for in section 485, Tariff Act of 1930, as amended or affidavits in connection with the entry of merchandise.
To sign and swear to any document and to perform any act that may be necessary or required by law or regulation in connection with the entering, clearing, lading, unlading, or operation of any vessel or other means of conveyance owned or operated by said grantor;
And generally to transact at the customshouses in any district, any and all customs business, including making, signing, and filing of protests under section 514 of the Tariff Act of 1930, in which said grantor is or may be concerned or interested and which may properly be transacted or performed by an agent and attorney, giving to said agent and attorney full power and authority to do anything whatever requisite and necessary to be done in the premises as fully as said grantor could do if present and acting, hereby ratifying and confirming all that the said agent and attorney shall lawfully do by virtue of these presents: the foregoing power of attorney to remain in full force and effect until the day of, 2, or until notice of revocation in writing is duly given to and received by a District Director of Customs. If the donor of this power of attorney is a partnership, the said power shall in no case have any force or effect after the expiration of 2 years from the date of its execution.
IN WITNESS WHEREOF, the said (X) Dafna Levran
(Full name of shipper) has caused these presents to be signed (X) (Signature of Shipper) DATE (X) 12.23.2024
(Signature of Shipper)
WITNESSED BY (X) (Witness name) (X) Witness Signature
withess signature

FORM APPROVED OMB NO. 1651-0014

U.S. DEPARTMENT OF HOMELAND SECURITY Bureau of Customs and Border Protection

DECLARATION FOR FREE ENTRY OF UNACCOMPANIED ARTICLES

19 CFR 148.6, 148.52, 148.53, 148.77

PAPERWORK REDUCTION ACT NOTICE: This request is in accordance with the Paperwork Reduction Act. We ask for the information in order to carry out the laws and regulations administered by the CBP. These regulations and forms apply to importers to ensure that they are complying with the law and to allow us to figure, collect, or refund the right amount of duty and tax. It is mandatory. The estimated average burden associated with this collection of information is 10 minutes per respondent depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0014), Washington, DC 20503.

PART I – TO BE COMPLETED assistance. REMEM	MBERAll of your statements are	NG FREE ENTRY (subject to verification	OF ARTICLES (Please	consult with the CBP ilure to declare article	official for additions could result in po	nal information or enalties.)	
1. IMPORTER'S NAME (Last, first a			2. IMPORTER'S DATE			DATE OF ARRIV	/AL
Dafna Levran			8/20/1981				
4. IMPORTER'S U.S. ADDRESS			5. IMPORTER'S PORT	OF ARRIVAL			
90 Westervelt PL, NJ 076	326, US		6. NAME OF ARRIVIN	G VESSEL CARRIEF	R AND FLIGHT/TR	RAIN	
7. NAME(S) OF ACCOMPANYING I	HOUSEHOLD MEMBERS (wife,	husband, minor childr	ren, etc.)				
Maor Levran							
8.THE ARTICLES FOR WHICH	IA DATE	D NAME OF VE	2051 (0400150	I a marina			
FREE ENTRY IS CLAIMED BELONG TO ME AND/OR MY FAMILY AND WERE IMPORTED	A. DATE	B. NAME OF VES	SSEL/CARRIER	C. FROM (Country)	K.	D. B/L OR AWB OF	I.T. NO.
E. NUMBER AND KINDS OF CONT	AINERS	F. MARKS AND I	NUMBERS				
PART II TO BE COMPLETED 9. RESIDENCY ("X" appropriate box		T U.S. PERSONN	A. NAME OF COUNTS		B I ENGTH O	E TIME	
I declare that my place of residence	'	7 was	A. NAME OF COUNTR	(1	B. LENGTH O	Yr.	Mo.
C. RESIDENCY STATUS UPON MY	-					3112	IVIO.
(1) Returning resident of the U.S		(2) Nonresident:	a. Emigrating to the	ne U.S.	b. Visiting	g the U.S.	
10. STATEMENT(S) OF ELIGIBILIT I the undersigned further declare that							
A. Applicable to RESIDENT A	ND NONRESIDENT		C. Applicable to N	ONRESIDENT ON	LY		
(1) All household effects acquire abroad for at least one year family was a resident memb for any other person or for s	by me or my family in a househo	old of which I or my	for which free e myself, or thos departure to th	pparel, personal ador entry is sought were a e members of my fan e United States and t	actually owned by nily who accompar hat they are appro	me and in the pos nied me, at the tim opriate and are into	session of ne of ended for
(2) All instruments, Implements professional books for which my account or I am an emig 9804.00.15, HTSUSA)	s, or tools of trade, occupation or h free entry is sought were taken trant who owned and used them	abroad by me or for	(2) Any vehicles, t	se and not for any oth railers, bicycles or oth rt of me and my famil	ner means of conv y and such incider	eyance being imp	orted are icles as
B. Applicable to RESIDENT O	NLY		are appropriate	to my personal use	of the conveyance	e. (9804.00.35, HT	SUSA)
All personal effects for which fre account. (9804.00.45, HTSUSA)	e entry is sought were taken abro)	oad by me or for my					
PART III TO BE COMPLETE	D BY U.S. PERSONNEL AN	ID EVACUEES ON	LY				
I, the undersigned, the owner, import possession of the importer, or of a m termination of assignment to extende United States, or because of Governiperson and that they do not include a United States.	er, or agent of the importer of the ember of the importer's family res ed duty (as defined in section 148 ment orders or instructions evacually iny alcoholic beverages or cigars	e personal and housels siding with the importe 3.74(d) of the Customs uating the importer to	nold effects for which free er, while abroad, and that a Regulations) at a post or the United States; and tha	they were imported in station outside the U	nto the United Stat Inited States and to	es because of the he CBP Territory	of the
1. DATE OF IMPORTER'S LAST DE	PARTURE FROM THE U.S.		2. A COPY OF THE IMPO WERE ISSUED ON:	ORTER'S TRAVEL O	RDERS IS ATTAC	CHED AND THE C	RDERS
PART IV TO BE COMPLETE requir	ED BY ALL PERSONS SEEP rements and must be specifically	KING FREE ENTRY declared herein. Pleas	Y OF ARTICLES (Certa se check all applicable ite	nin articles may be su ms and list them sep	bject to duty and/o arately in item D o	or other on the reverse.)	
A. For U.S. Personnel, Evacue	es, Residents and Non-Res	sidents B	. For Residents and	Non-Residents Of	VI Y		*
(1) Articles for the account of other persons.	(2) Articles for sale or commercial use.	_	(7) Foreign household abroad and used le	effects acquired 🔽	(8) Foreign hou	usehold effects ac	
(3) Firearms and/or ammunition.	(4) Alcoholic articles of types or tobacco p		. For Resident ONLY				one year.
(5) Equito plantad-	TO WARD MAKE NO COLUMN CO. IN		(9) Personal effects ac	quired abroad.			
(5) Fruits, plants, seeds, meats, or birds.	(6) Fish, wildlife, anim products thereof.	nai 🔲	(10) Foreign made artic	cles acquired in the Unnanther trip that wa			is trip or
			(11) Articles taken abro	oad for which alteration	ns or repairs were	e performed abroa	d.

D. LIST OF ARTICLES					
(1) ITEM NUMBER CHECKED IN PART IV, A., B., C.	(2) DESC	CRIPTION OF MERCHANDISE	(3) VALUE OR COST OF REPAIRS	THIS TRI	N MERCHANDISE TAKEN ABROAD IP: State where in the U.S. the foreign dise was acquired or when and where it iously declared to CBP.
	- Clothe - Bikes				
8				ş	
7					
PART V CARRIER'S CER					
consignee of such articles within	the purview of secti	tion 484(h), Tariff Act of 1930.			erson named in Part I, 1., is the owner or
NAME OF CARRIER	S OT SECUOII 404(II),	Tariff Act of 1930, authority is hereby gi	2. SIGNATURE OF A		
I, the undersigned, certify that th		ETED BY ALL PERSONS SEEKINg rect and complete.	NG FREE ENTRY		
1. "X" One A. Authorized Agent* (Fro	om facts obtained fro	om the importer)	B. Importer		
2. SIGNATURE	hren		The second secon	3. DATE 12/23/202	
PART VII CBP U (Inspected and Rel	SE ONLY	al knowledge of the facts and who is specifically 1. SIGNATURE OF CBP OFFICIAL	empowered under a power o	of attorney to execute th	nis declaration (see 19 CFR 141.19, 141.32, 141.33). 2. DATE

TREASURY DEPARTMENT U.S. CUSTOMS SERVICE SUPPLEMENTAL DECLARATION FOR UNACCOMPANIED PERSONAL AND HOUSEHOLD EFFECTS

Owner of Household Goods (Last, first and middle) Dafna Levran	
2. Date of Birth 8/20/1981	3. Citizenship
4. Passport (Country and Number) Israeli 41174839	
5. Social Security No.	6. Resident Alien No.
7. U.S. Address 90 Westervelt PL, NJ 07626, US	10. Employer
	11. Position with Company
8. Foreign Address Golda Meir 1, Hod Hasharon Is	srael
	12. Length of Employment
	13. Nature of Business
9. Reason for Moving Rellocation	
	14. Name and Telephone of Company Official Who Can Verify Above Information
 Name and Address of Freight Forwarders Packers and Shipping Agents 	2
16. Shipment Itinerary (specify place of loading and intermediate ports)	
17. Certification I, the undersigned, certify that this declaration is correct and com	nplete
\square A. Authorized Agent (from facts obtained from the importer)	
☑ B. Importer	
Signature Define	Date 23/12/2024



	COI	NTACT IN	FORMATIO	N FORM	
When you ask us to tal	ke care of your relocation	on we kindly request you	to fill in this form and ret	urn it to us.	and the second s
					搜索的理解 医含化物
Client Dafna Levarn	***************************************	Account			Job number
Loading address / de	etails		Address of destinatio	n / details	
Golda Meir 1, Hod H	asharon , Israel		90 Westervelt PL, Cre	esskill, 07626, NJ, US	;
Phone 1	972-54-6421981		Phone 1	+1 646 9170331	
Phone 2			Phone 2	972-54-4682873	
Phone cell			Phone cell		
Facsimile			Facsimile		
Email (very important)	levrandafna@gmail.com		Email (very important)	Maorlevran@gmail.com Levrandafna@gmail.com	
Date you depart from this address	12/27/2024		Date you arrive at this address	1/15/2025	
Phone 1 Phone 2 Phone cell Facsimile Email (very important) We can reach you at this address from - till Request date(s) of			Phone 1 Phone 2 Phone cell Facsimile Email (very important) We can reach you at this address from - till		
loading					
Timing of shipping of your goods	A.S.A.P. AFT PACKING		AT MY CALL	ON A	CERTAIN DATE:
Service requested					-SERVICE INTO
Place		Date			
FIGLE		12/23/2024		Signature	,