



1 FROM (SHIPPER)

Shipper's Account No.

Shipper's Ref.

130811973

FROM (Your Name) Print Please

Phone Number

00

Intl Code

Area Code

Local No.

Dept./Room No.

no limits

ORG. STN DEST. STN

EBL

DEST. STN

EBL

41171168032

4 SHIPMENT INFORMATION

No. of Pieces Actual Weight "Chargeable" Weight Country of Manufacture

137

4,000.00KG

4,000.00

KG

IQ

Description of Goods/Harmonized Code: clothes

Customs Value

Currency

0.00 USD

Street Address

ainkawa

City

Erbil

State/Province

Erbil

Country

IQ

ZIP/Postal Code

2 TO (RECEIVER)

Receiver's Account No.

Receiver's Ref.

To (Receiver Name) Print Please

Grand Majidi Mall

Phone Number(s)

00

Company

Grand Majidi Mall

Dept./Room No.

Street Address

Arbil

City

Erbil

State/Province

Erbil

Country

Iraq

ZIP/Postal Code

3 SHIPPER'S SIGNATURE & AUTHORIZATION

Shipper's no limits

Signature (Required) X

Date

Time

HH/MM

08/12/2024

Date

Time

HH/MM

Received

Collection Ref.

Collection Location

Shipper's Door

Aramex Terminal

Other

5 SERVICES

PROD GRP

PROD TYP

DOM

ONP

SVC CODE

SVC CODE

SVC CODE

DOMESTIC ROUTING

6 TRANSPORTATION CHARGES

Default to Shipper Account if Not Noted

Bill Shipper

 Cash Prepaid Stock Account Bill Receiver Account (Collect)

A/C No. _____

 Bill 3rd Party "Approved" Account

APP A/C No. _____

Transport/Svc Charges: _____

Currency: _____

7 DUTIES AND TAXES

Default to Receiver if not Noted

 Bill Shipper Account (Freight) Bill Receiver Bill 3rd Party "Approved" Account

APP A/C No. _____

8 COST OF GOODS

No Charges if not Noted

 Bill Receiver Bill 3rd Party "Approved" Account

APP A/C No. _____

Cost of Goods: 0.00

Currency: _____

9 RECEIVER SIGNATURE

Received above shipment in good order and condition

Receiver's

Signature (Required) X

Name (Please Print)

Date DD/MM/YY

Time HH/MM

GLOBAL DISTRIBUTION ALLIANCE