

ARAB LEGEND COMPANY

TO: Manager of our company

DATE: 7-Jan-2026

FROM: BIAP office

SUBJECT: Expenses CLEARANCE AND DELIVERY CHARGES

Rate \$1=(1,420 IDs)

CNEE : STARLIGHT

REFER: AWB# 512-72454336

7 PCs\84 KG

JOB#1207

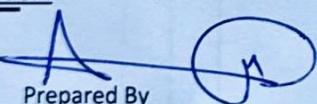
Descriptions	AMOUNT \$	AMOUNT PAID IN IQD
CLEARANCE FORMALITY OF SPARE PAERTS	\$900	
TOTAL	\$900	

Driver Name:

Truck Type:

Truck Number:

Distination:



Prepared By
BIAP Office Acc.



Shipper's Name and Address				Shipper's account Number				Not negotiable ROYAL JORDANIAN Air Waybill HOUSING BANK COMMERCIAL CENTR Issued by QUEEN NUR STREET AMMAN, JORDAN							
REPROLINE MEDICAL GMBH ZEISSSTRASSE 15 53359 RHEINBACH								Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity							
Consignee's Name and Address				Consignee's account Number				ANKUNFT / ARRIVED:							
ARAB LEGEND FOR GENERAL TRADING COMPANY BAGHDAD INTERNATIONAL AIRPORT 000000 BAGHDAD - IRAQ															
Issuing Carrier's Agent Name and City TRANSWAY AIRFREIGHT GMBH 65479 RAUNHEIM								Accounting Information TE: +964 771 524 8204							
Agent's IATA Code 23-4 7216 6012				Account No. 0				Reference: 251250006							
Airport of Departure (Addr. of first Carrier) and requested Routing FRANKFURT								Reference Number 251250006			Optional Shipping Inform.				
to MST	By first Carrier RJ			to AMM	by RJ	to BGW	by RJ	Currency EUR	CHG Code P	WT/VAL PP CC	Other PP CC	Decl. Value for Carriage NVD	Decl. Value for Customs NCV		
			X												
Airport of Destination BAGHDAD				Requested Flight / Date RJ1036/31 RJ818/02				Amount of Insurance NIL			INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with conditions thereof, indicate amount to be in figures in box marked "Amount of Insurance".				
Handling Information TRANSWAY AIRFREIGHT GMBH DE/RA/00194-01 * NOT SECURED CARGO * - EBR OK -															
EC-STATUS: X															
No. of Pieces RCP	Gross Weight	kg lb	Rate Class Commodity Item No.	Chargeable Weight	Rate Charge		Total		Nature and Quantity of Goods (incl. Dimensions of Volume)						
7	84,3	K	Q	214,0	3,46		740,44		LABORATORY EQUIPMENT HS CODE: 90183110 1 X 66 X 46 X 55 1 X 65 X 46 X 28 5 X 65 X 46 X 69						
7	84,3						740,44		TOTAL CBM: 1,282						
Prepaid 740,44 Valuation Charge								Other Charges 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.							
Total other Charges Due Agent															
Total other Charges Due Carrier								TRANSWAY AIRFREIGHT GMBH THOMAS TAGILZEW Signature of Shipper or his Agent							
Total prepaid 740,44 Currency Conversion Rates CC Charges in Dest. Currency															
For Carrier's Use only at Destination								Charges at Destination		Total Collect Charges		FOR ABOVE NAMED CARRIER: ROYAL JORDANIAN TRANSWAY AIRFREIGHT GMBH, AS AGENT 23.DEC.2025 65479 RAUNHEIM Executed on (Date) at (Place) Signature of Issuing Carrier or its Agent			

512-7245 4336

STARLIGHT Airlines

Address: Iraq 1 Erbil 1 Beside US Consulate
Mob: +964 750 1447480
Email: erbil@starlightmaritime.com

Date: 4-JAN-2026

DELIVERY NOTE

Consignee :
LUVIAN MEDICAL
Baghdad, IRAQ
Delivery Adress: 606-25 ال السادس والستون
Contact Person: +964 773 342 4575

QTY	DESCRIPTION	REMARKS
7 pieces	AWB# 512-72454336	84.3 KGs.
	Reproline	

Received by: _____ Phone No. _____

Signature: _____ Date: _____

ج.ا.م / ٤ / ٢٠٢٦

