

ARAB LEGEND COMPANY

TO: Manager of our company

DATE: 27-Jan-2026

FROM: BIAP office

SUBJECT: Expenses CLEARANCE AND DELIVERY CHARGES

Rate \$1=(1,450 IDs)

CNEE : STARLIGHT\MASS

REFER: AWB# 235-15960630

2 PCs\146 KG

JOB#1272

Descriptions	AMOUNT \$	AMOUNT PAID IN IQD
CLEARANCE FORMALITY OF SPARE PAERTS	\$1,000	
TOTAL	\$1,000	

Driver Name:

Truck Type:

Truck Number:

Distination:

Prepared By
BIAP Office Acc.



Shipper's Name and Address STARLIGHT AIRLINES Dream City (No. 1176), Erbil, Iraq		Shipper's account Number		<p>Not negotiable Air Waybill (AIR CONSIGNMENT NOTE)</p> <p>Issued by TK</p> <p>Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity</p>												
Consignee's Name and Address Transway Airfreight GmbH Mönchhofallee 14 D – 65479 Raunheim / Germany		Consignee's account number		<p>It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carrier 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 of liability by declaring a higher value for carriage and paying a supplemental charge if required.</p>												
Issuing Carrier's Agent Name and City Starlight Airlines Erbil, Iraq						<p>Accounting Information</p> <p>DCL-165</p>										
Agent's IATA Code			Account No			<p>Airport of Departure (Addr. Of first Carrier) and requested Routing BGW Airport</p>										
To	By first Carrier		To	By	To	By	Currency	CHGS Code	WT/VAL		Other		Declared Value for Carriage	Declared Value for Customs		
							USD	PPD	PPD X	COLL	PPD X	COLL	NVD	NVC		
Airport of Destination FRA Airport			Flight TK61 23		Date 27- Jan		Amount of Insurance NIL				INSURANCE – If Carrier offers insurance, and such insurance is requested in accordance with the conditions thereof, indicate amount to be insured in figures in box marked "Amount of Insurance"					
Handling information																
HAWB STL 0011626														SCI		
No. Of Pieces RCP	Gross Weight	Kg lb	Rate Class	Chargeable weight	Rate Charge		Total		Nature and Quantity of Goods (incl. Dimensions or Volume)							
2	146 Kg	Kg		146 Kg	AS AGREED		AS AGREED		Cylindrical Filter Conical Filter 63 kg 97x57x93 cm 83 kg 95x82x120 cm HS code: 842139000001							
2	146 Kg						AS AGREED									
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 is in proper condition for carriage by air according to the applicable dangerous goods regulations.											
		TAX														
Total other Charges Due Agent																
Total other Charges Due Agent																
Signature of Shipper or his Agent																
Total Prepaid		Total Collect			235 -15960630											
AS AGREED					Executed or (Date)	12/Jan/26	At (Place)	EBL	Signature of Issuing Carrier or its Agent							

ORIGINAL 1 (FOR ISSUING CARRIER)