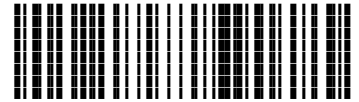


aramex

FORWARDER
AIRWAYBILL

1 FROM (SHIPPER)

Shipper's Account No.		Shipper's Ref.	
FROM (Your Name) Print Please Tatiana Silva		Phone Number 441252601486	
Company Sondex Wireline Limited		Local No. Dept./Room No.	
Street Address Cody technology park Building X107,Range Road			
City Farnborough		State/Province	
Country GB		ZIP/Postal Code GU14 0FG	

2 TO (RECEIVER)

Receiver's Account No. 130811973		Receiver's Ref. IMI16715	
To (Receiver Name) Print Please ALA AKRAM		Phone Number(s) 9647518103857	
Company STARLIGHT AIRLINES		Dept./Room No.	
Street Address Erbil, Dream City Villa No. 1176			
City Erbil		State/Province Erbil	
Country Iraq		ZIP/Postal Code	

3 SHIPPER'S SIGNATURE & AUTHORIZATION

Shipper's Tatiana Silva		Date	Time
Signature (Required) X		02/27/2025	HH/MM
Received		Date	Time
			HH/MM
Collection Location <input type="checkbox"/> Shipper's Door <input type="checkbox"/> Aramex Terminal <input checked="" type="checkbox"/> Other		Collection Ref.	

ORG. STN

DEST. STN

LON

EBL

31301039081

4 SHIPMENT INFORMATION

No. of Pieces 1	Actual Weight 0.46KG	"Chargeable" Weight 0.46 KG	Country of Manufacture GB
Description of Goods/Harmonized Code: Spare parts			Currency USD
			Customs Value 1,330.00

5 SERVICES

PROD GRP EXP	PROD TYP PPX	
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 (Free Domicile)

☐ 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	Date	Time
Signature (Required) X	DD / MM / YY	HH / MM
Name (Please Print)		



GLOBAL DISTRIBUTION ALLIANCE