

WHITE SECTIONS ARE MANDATORY. PLEASE COMPLETE IN CAPITALS AND PRESS HARD.

**1. Sender's Account Number**

SENDER LIABLE FOR UNPAID CHARGES							

**2. Invoice to Receiver**

Cross box  and provide receiver's account number or call Customer Service for correct account details

**3. Customer Reference** (Information you would like on the invoice (if required))

IQ3 920801

**4. From (Collection Address)**

Name: PROBUS MILL COTTAGE,

Address: PROBUS CORNWALL

City: TRURO Postal / Zip Code: TR2 4HG

Province/Region: Country: GB

Contact Name: ANDREW IRVING Tel. No.: 0792908 9632

**5. To (Receiver)**

Name: STARLIGHT MARITIME

Address: ERBIL, DREAM CITY VILLA NO. 11

76 WE CANNOT DELIVER  
TO P. O. BOX NUMBERS

City: ERBIL Postal / Zip Code:

Province/Region: Country: IQ

Contact Name: ALA AKRAM Tel. No.: 075181 03857

**6. Delivery Address** (If different from receiver's address above)

Name:

Address:

WE CANNOT DELIVER  
TO P. O. BOX NUMBERS

City: Postal / Zip Code:

Province/Region: Country:

Contact Name: Tel. No.:

**7. Dangerous Goods** (Cross correct box)

Does this consignment contain any dangerous goods? If yes, please call our Customer Service.

Yes  No

CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE

Your Signature

Received by TNT (to be completed by TNT)

Date: (Day/Month/Year) Date: Time: :



GD 328586694 WW

Please quote this Number if you have an enquiry.

**8a. Services** (Cross one box only to select a Service)

Documents Non-Documents

Special Express

9:00 Express

10:00 Express

12:00 Express

Express

12:00 Economy Express

Economy Express

Please contact Customer Service to arrange shipment. For contact and service details, please see brochure. If no service is selected, the Express service will be provided and invoiced.

**8b. Options** (Cross boxes)

Priority

Priority handling from pickup to delivery  
For Express and Economy Express

Enhanced

Liability

For documents and non-documents  
subject to Terms and Conditions on  
reverse

Currency

Insured amount for non-documents only

**9. Special Delivery Instructions** (Reserved for your instructions (if required))

**10. Goods Descriptions** (If dutiable please complete section 11)

General Description Please put full details on commercial invoice	Number of Items	Weight		Dimensions		
		Kilos	Grams	Length	Width	Height
O-RING	1	Kilos	Grams	38 centimeters	30 centimeters	8 centimeters
		Kilos	Grams	Centimeters	Centimeters	Centimeters
		Kilos	Grams	Centimeters	Centimeters	Centimeters
		Kilos	Grams	Centimeters	Centimeters	Centimeters
Stat. No.	Total	1	1 Kilos	50 cms	Consignment subject to volumetric measurement Please refer to our brochure or call Customer Service	

**11. Dutiable Shipment Details** (Complete for dutiable consignments)

Receiver's VAT / TVA / BTW / MWST No.

Currency	Invoice value of dutiables										

SENDER'S COPY

Please keep for Reference



1. Sender's Account Number

SENDER LIABLE FOR UNPAID CHARGES

2. Invoice to Receiver

Receiver's account number

3. Customer Reference

IQ3 920801

4. From (Collection Address)

Name: PROBUS MILL COTTAGE,  
Address: PROBUS CORNWALL

City: TRURO Postal / Zip Code: TR2 4HG

Province/Region: Country: GB

Contact Name: ANDREW IRVING Tel. No.: 0792908 9632

5. To (Receiver)

Name: STARLIGHT MARITIME  
Address: ERBIL, DREAM CITY VILLA NO. 11  
76

City: ERBIL Postal / Zip Code:

Province/Region: Country: IQ

Contact Name: ALA AKRAM Tel. No.: 075181 03857

6. Delivery Address

Name:

Address:

City: Postal / Zip Code:

Province/Region: Country:

Contact Name: Tel. No.:

7. Dangerous Goods

Does this consignment contain any dangerous goods?

Yes  No 

CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE

Your Signature

Received by TNT

Date: (Day/Month/Year)

Date: Time: :

Sending Depot Receiving Depot

BQC

IQ3



GD 328586694 WW

Please quote this Number if you have an enquiry.

8a. Services

	Documents	Non-Documents
Special Express	<input type="checkbox"/>	<input type="checkbox"/>
9:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
10:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
12:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
Express	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12:00 Economy Express	<input type="checkbox"/>	<input type="checkbox"/>
Economy Express	<input type="checkbox"/>	<input type="checkbox"/>

8b. Options

Priority	<input type="checkbox"/>
Enhanced Liability	<input type="checkbox"/>
For documents and non-documents subject to Terms and Conditions on reverse	<input type="checkbox"/>
	<input type="checkbox"/>

9. Special Delivery Instructions

10. Goods Descriptions

General Description	Number of Items	Weight		Dimensions		
		Kilos	Grams	Length	Width	Height
O- RING	1			38	30	8
Stat. No.	Total	1	1	50	Volume:	
OPS verify:					Volume: Weights:	

11. Dutiable Shipment Details

Receiver SVAT / IVA / BTW / MWST No.

087546785434563464645647572513554  
087546785434563464645647572513554  
087546785434563464645647572513554  
087546785434563464645647572513554

RECEIVER'S COPY



1. Sender's Account Number		
2. Invoice to Receiver	SENDER LIABLE FOR UNPAID CHARGES	
<input checked="" type="checkbox"/>	Receiver's account number	
3. Customer Reference		
IQ3 920801		

Name: PROBUS MILL COTTAGE,	
Address: PROBUS	CORNWALL
City: TRURO	Postal / Zip Code: TR2 4HG
Province/Region:	Country: GB
Contact Name: ANDREW IRVING	Tel. No.: 0792908 9632

Name: STARLIGHT MARITIME	
Address: ERBIL, DREAM CITY VILLA NO. 11	
76	
City: ERBIL	Postal / Zip Code:
Province/Region:	Country: IQ
Contact Name: ALA AKRAM	Tel. No.: 075181 03857

Name:	
Address:	
City:	Postal / Zip Code:
Province/Region:	Country:
Contact Name:	Tel. No.:

7. Dangerous Goods		
Does this consignment contain any dangerous goods?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE		
Your Signature	Received by TNT	
Date: (Day/Month/Year)	Date:	Time: :

Sending Depot BQC	Receiving Depot IQ3
----------------------	------------------------



GD 328586694 WW  
Please quote this Number if you have an enquiry.

#### 8a. Services

Special Express	Documents	Non-Documents
9:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
10:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
12:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
Express	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12:00 Economy Express	<input type="checkbox"/>	<input type="checkbox"/>
Economy Express	<input type="checkbox"/>	<input type="checkbox"/>

#### 8b. Options

Priority	<input type="checkbox"/>
Enhanced Liability	<input type="checkbox"/>
For documents and non-documents subject to Terms and Conditions on reverse	
Currency	<input type="checkbox"/>
Value	<input type="checkbox"/>

#### 9. Special Delivery Instructions

--	--

#### 10. Goods Descriptions

General Description	Number of items	Weight		Dimensions		
		Kilos	Grams	Length	Width	Height
O-RING	1			38	30	8
Stat. No.	Total	1	1	50	Volume:	
OPS verify:					Volume: Weights:	

#### 11. Dutiable Shipment Details

Receiver's VAT / TVA / BTW / MWST No.	
Currency <input type="checkbox"/> Value <input type="checkbox"/>	
DATA PREP COPY Form 38-0101	

1. Sender's Account Number	<input type="text"/>	
2. Invoice to Receiver	SENDER LIABLE FOR UNPAID CHARGES	
<input checked="" type="checkbox"/>	Receiver's account number	<input type="text"/>
3. Customer Reference	<input type="text"/> IQ3 920801	

4. From (Collection Address)

Name: PROBUS MILL COTTAGE,	Address: PROBUS CORNWALL
City: TRURO	Postal / Zip Code: TR2 4HG
Province/Region:	Country: GB
Contact Name: ANDREW IRVING	Tel. No.: 0792908 9632

5. To (Receiver)

Name: STARLIGHT MARITIME	Address: ERBIL, DREAM CITY VILLA NO. 11 76
City: ERBIL	Postal / Zip Code:
Province/Region:	Country: IQ
Contact Name: ALA AKRAM	Tel. No.: 075181 03857

6. Delivery Address

Name:	Address:
City:	Postal / Zip Code:
Province/Region:	Country:
Contact Name:	Tel. No.:

7. Dangerous Goods

Does this consignment contain any dangerous goods? Yes  No

CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE

Your Signature	Received by TNT
Date: _____	(Day/Month/Year)
Date: _____	Time: _____

Sending Depot Receiving Depot  
BQC IQ3



GD 328586694 WW

Please quote this Number if you have an enquiry.

8a. Services

	Documents	Non-Documents
Special Express	<input type="checkbox"/>	<input type="checkbox"/>
9:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
10:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
12:00 Express	<input type="checkbox"/>	<input type="checkbox"/>
Express	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12:00 Economy Express	<input type="checkbox"/>	<input type="checkbox"/>
Economy Express	<input type="checkbox"/>	<input type="checkbox"/>

8b. Options

Priority	<input type="checkbox"/>
Enhanced Liability	<input type="checkbox"/>
For documents and non-documents subject to Terms and Conditions on reverse Currency	<input type="checkbox"/>
Value	<input type="checkbox"/>

9. Special Delivery Instructions

--

10. Goods Descriptions

General Description	Number of Items	Weight		Dimensions		
		Kilos	Grams	Length	Width	Height
O- RING	1			38	30	8
Stat. No.	Total	1	1	50	Volume:	
OPS verify:					Volume: Weights:	

11. Dutiable Shipment Details

Receiver's VAT / TVA / BTW / MWST No.	
Currency	Value
<input type="text"/>	<input type="text"/>

INVOICE COPY



1. Sender's Account Number	[REDACTED]	
2. Invoice to Receiver	SENDER LIABLE FOR UNPAID CHARGES	
<input checked="" type="checkbox"/>	Receiver's account number	[REDACTED]
3. Customer Reference	[REDACTED]	
IQ3 920801		

4. From (Collection Address)			
Name:	PROBUS MILL COTTAGE,		
Address:	PROBUS    CORNWALL		
City:	TRURO	Postal / Zip Code:	TR2 4HG
Province/Region:		Country:	GB
Contact Name:	ANDREW IRVING	Tel. No.:	0792908 9632

5. To (Receiver)			
Name:	STARLIGHT MARITIME		
Address:	ERBIL, DREAM CITY VILLA NO. 11 76		
City:	ERBIL	Postal / Zip Code:	
Province/Region:		Country:	IQ
Contact Name:	ALA AKRAM	Tel. No.:	075181 03857

6. Delivery Address			
Name:			
Address:			
City:		Postal / Zip Code:	
Province/Region:		Country:	
Contact Name:		Tel. No.:	

7. Dangerous Goods		
Does this consignment contain any dangerous goods?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
CARRIAGE OF THIS CONSIGNMENT IS SUBJECT TO THE TERMS AND CONDITIONS ON THE REVERSE		
Your Signature	Received by TNT	
Date:	(Day/Month/Year)	Date: Time: :

Sending Depot BQC	Receiving Depot IQ3
----------------------	------------------------



GD 328586694 WW

Please quote this Number if you have an enquiry.

8a. Services		8b. Options	
Special Express	<input type="checkbox"/>	Documents	Non-Documents
9:00 Express	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10:00 Express	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12:00 Express	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Express	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12:00 Economy Express	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Economy Express	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Priority <input type="checkbox"/>			
Enhanced Liability <input type="checkbox"/>			
For documents and non-documents subject to Terms and Conditions on reverse			

9. Special Delivery Instructions	
[REDACTED]	

10. Goods Descriptions						
General Description	Number of Items	Weight		Dimensions		
O-RING	1	Kilos	Grams	Length	Width	Height
				38	30	8
Stat. No.	Total	1	1	50	Volume:	
OPS verify:					Volume: Weights:	

11. Dutiable Shipment Details	
Receiver's VAT / TVA / BTW / MWST No.	
Currency <input type="text"/> Value <input type="text"/>	
CUSTOMS COPY	