



31720472722

1 FROM (SHIPPER)	
Shipper's Account No 134623	Shipper's Ref
FROM(Your Name) Print Please ROHIT KUMAR	Phone Number 8130026091 <small>Int'l Code Area Code Local No</small>
Company IV PROCESSING PVT LTD	
Street Address C-4.COMMERCIAL COMPLEX,1ST FLOOR.SAFDARJUNG DEVE	
City Delhi	State/Province Delhi
Country India	ZIP/Postal Code 110016
2 TO (Receiver)	
Receiver's Account No	Receiver's Ref
TO(Receiver Name) Print Please 0094114360088	Phone Number(s) 94114360088
Company NISHANTHI DE SILVA	
Street Address (ARAMEX CANNOT DELIVER TO A P.O. BOX) ISRAEL VISA APPLICATION CENTRE,2ND FLR, 330 GALLE ROAD	
City Colombo	State/Province Colombo
Country Sri Lanka	ZIP/Postal Code 00400
3 SHIPPER'S SIGNATURE & AUTHORIZATION	
Signature (Required) X Shipper's ROHIT KUMAR	Date 11/12/2020
	Time 14:11
Received By Aramex	Date
Collection location	Time
<input type="checkbox"/> Shipper's Door <input type="checkbox"/> Aramex Terminal <input type="checkbox"/> Other	Collection Ref

ORG. STN DEL	DEST. STN CMB
4 SHIPMENT INFORMATION	
No. of Pieces 1	"Actual" Weight 0.5 Kg
"Chargeable" Weight 0.5	Country of Manufacture
Description of Goods/Harmonized Code Documents	
Shipment Reference	
Customs Value 0	Currency INR
5 SERVICES	
PROD GRP EXP	PROD TYP PDX
REMARKS	
SVC CODE	SVC CODE
6 TRANSPORTATION CHARGES	
Default to Shipper Account if Not Noted	
Bill Shipper	
<input type="checkbox"/> Cash	
<input type="checkbox"/> Prepaid Stock	
<input checked="" type="checkbox"/> Account	
<input type="checkbox"/> Bill receiver Account (Collect)	
A/C No. _____	
<input type="checkbox"/> Bill 3rd Party "Approved" Account	
APP A/C No. _____	
Transport/Svc Charges : _____	
Currency _____	
7 DUTIES AND TAXES	
Default to Receiver if Not Noted	
<input type="checkbox"/> Default to Shipper Account (Free Domicile)	
<input type="checkbox"/> Bill Receiver	
<input type="checkbox"/> Bill 3rd Party "Approved" Account	
APP A/C No. _____	
8 COST OF GOODS	
No Charges if not Noted	
<input type="checkbox"/> Bill receiver	
<input type="checkbox"/> Bill 3rd Party "Approved" Account	
APP A/C No. 0	
Cost of Goods. _____	
Currency : INR	
9 RECEIVER SIGNATURE	
Received above shipment in good order and condition	
Receiver's	Date
Signature (Required) X	Time
	DD / MM / YY
Name (Please Print)	



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