Prepared by

Cargogate Munich Airport GmbH

MANIFEST

ICAO ANNEX 9 APPENDIX 3

FLIGHT NO.	**: PC 1020**	**28NOV2024**	**11:15**	**PAGE : 1/1**
AIRCRAFT REG. NO.	**: TCRDI**			
POINT OF LADING	**: MUC**	**POINT OF UNLADING:**	**SAW**	
CARRIER	**: Pegasus**			security checked

AWB	PCS/TTL	NATURE OF GOODS	WGT/KG	ORIG	DEST	CI	SPLs	REMARKS
BULK								
624 51922581	4/4	PERSO EFFECTS	66,0	MUC	DXB	X	SPX	
624 51959213	8/8	PERSONAL EFFECTS	158,0	MUC	AUH	X	SPX	
624 52046875	27/27	COURIER MAT	335,4	MUC	EVN	X	SPX	
624 52047962	1/1	HUMAN REMAINS	138,0	MUC	SAW	X	HUM, SPX	
TOTAL BULK	**40**		**697,4**					
TOTAL	**40**		**697,4**					

ULD/Bulk Load Weight Statement

Airline	Flight No.	Date	Registration	Destination
PC	PC 1020	28-11-2024	TCRDI	SAW

T	ULD	Contour No Code	Height	Gross Weight	ULD Info Type / Side cm cm for ULD	SHC	ULD Dest	Remarks	LC

Total ULD Weights: 0,00

Trolly Nbr	Gross Weight	Remarks	SHC	Unloading Point	LC
74739	335,00		SPX	SAW	C
75890	362,00		HUM, SPX	SAW	C

Total BULK Weights: 697,00

ALL WEIGHTS IN KG

SPECIAL LOAD - NOTIFICATION TO CAPTAIN

Station of Loading	Flight Number	Date	Aircraft Registration	Prepared by	Remark	Page: 1 / 1
MUC	PC 1020	28NOV2024	TCRDI	Danis		

DANGEROUS GOODS

Station of Unload	Air Waybill Number	Proper Shipping Name	Class or Div. (Sub Risk)	UN/ID Nr	Erg Code	Nbr. of Pkge	Net Qty or TI per Pkge	RAD Cat.	PG	IMP Code	CAO [X]	ULD/ID-No.	POS

There is no evidence that any damaged or leaking packages containing dangerous goods have been loaded on the aircraft

OTHER SPECIAL LOAD

Station of Unload	Air Waybill Number	Contents and Description	Nbr. of Pkge	Net Qty per Pkge	Supplementary Information	IMP Code	ULD/ID-No.	POS
SAW	624 52047962	Human Remains	1	138,0 Kg		HUM	BULK	

Captain's Signature:	LOADING CERTIFICATION I certify that these articles have been loaded in accordance with all regulations and that there is no evidence of leaking or damaged packages. (to be signed by Loadcontroller) Loading Supervisor's name and signature	ACCEPTANCE CERTIFICATION I hereby certify that the above shipments have been checked and are in conformity with the current regulations. (to be signed by Handling Agent) Building Supervisor's name and signature

624 MUC 5192 2581 **624 - 5192 2581**

Shipper's Name and Address	Shipper's Account Number
NAHID DAWOOD KHALIFA BUSAOUD ALMARRI WESTIN GRAND HOTEL ARABELLASTR. 6 81925 MUENCHEN GERMANY	

Not negotiable
Air Waybill
Issued by

PEGASUS HAVA TASIMACILIGI A.S.
BASIN EKSPRES CADDESI NO: 2/A
34303 KUCUKCEKMECE/HALKALI
ISTANBUL

Consignee's Name and Address	Consignee's Account Number
NAHID DAWOOD KHALIFA BUSAOUD ALMARRI ZAABEEL2 STR 18/33B VILLA 22 DUBAI UAE	

Issuing Carrier's Agent Name and City	Accounting Information
LEANFLEX ORGANISATION & LOGISTIK GMBH SUEDALLEE, CARGO MODUL A	NOTIFY CNEE AFTER ARRIVAL: NAHID DAWOOD KHALIFA BUSAOUD ALMARRI TEL: +971505358857 NOE MEASURES PROVIDED FOR TAX REFUND ECD ZKDVO ART. 137A

Agents IATA Code	Account No.
23-4 7248 8012	

Airport of Departure	Reference Number	Optional Shipping Information	
MUNICH			

to	By first Carrier	to	by	to	by	Currency	CHGS	WT/VAL		Other		Declared Value for Carriage	Declared Value for Customs
SAW	PEGASUS AIRLINES	DXB	PC			EUR		P		P		N V D	N C V

Airport of Destination	Requested Flight / Date		Amount of Insurance
DUBAI	PC1020/28	PC740/28	N I L

Handling Information DE/RA/00144-01
4 (FOUR) COLLI MARKED AS ADDRESS, LABELLED
REGULATED AGENT - DE/RA/00144-01 - "NOT SECURED CARGO"

SCI
- X -

No. of Pieces	Gross Weight	kg/lb	Rate Class / Commodity	Chargeable Weight	Rate / Charge	Total	Nature and Quantity of Goods
4	66,0	K	Q	66,0	4,56	300,96	PERSONAL EFFECTS NOT RESTRICTED 2* 64 X 46 X 33 CMS 1* 74 X 48 X 33 CMS 1* 57 X 38 X 38 CMS
4	**66,0**	K				**300,96**	ECD: ZKDVO ART. 137A

CARGOSCREENER
DE/RA/01291-04
Sign: Galne-Laptak
Time: 1116
27. Nov. 2024
Gerät: 1
SPX by: X-RY PHS EDD ETD VCK AOM

Prepaid	Weight Charge	Collect
300,96		

Valuation Charge

TAX

Total other charges due agent

Total other charges due carrier

Other Charges

Shipper certifies that .....

Leanflex
Organisation & Logistik GmbH
85356 Muenchen

Signature of Shipper or its Agent: Heiko Tesche

Total prepaid	Total collect
300,96	

Currency Conversion Rates	CC Charges in Dest. Currency

Leanflex
Organisation & Logistik GmbH
26.11.2024 13:47:11 MUENCHEN
Executed on Date at Place

Heiko Tesche
Signature of Issuing Carrier or its Agent

For carrier's use only	Charges at Destination	Total collect charges

10241101037 624 - 5192 2581

624 MUC 5195 9213 624-5195 9213

Shipper's Name and Address	Shipper's account Number	
249 MARIAM SAEED ALMANSOORI LANDWEHRSTRAßE 28 80336 MÜNCHEN	21197	Not negotiable **Air Waybill** Issued by PEGASUS AIRLINES PEGASUS HAVA TASIMACILIGI A.S BASIN EKSPRES CADDESI NO: 2/A 34303 KUCUKCEKMECE//HALKALI
		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	It agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage 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
249 MARIAM SAEED ALMANSOORI ABU DHABI V.A.E.	21197	
Issuing Carrier's Agent Name and City PRO SERVICE GMBH 85356 MUNICH - DE/RA/00255-01		Accounting Information 00971505888963
Agent's IATA Code 23-4 7140 8015	Account No.	Reference:
Airport of Departure (Addr. of first Carrier) and requested Routing MUNICH		Reference Number 50-60335-11-24 Optional Shipping Inform.

to	By first Carrier	to	by	to	by	Currency	CHG Code	WT/VAL PP	WT/VAL CC	Other PP	Other CC	Decl. Value for Carriage	Decl. Value for Customs
AUH	PC					EUR	P	P		X		NVD	NCV

Airport of Destination	Requested Flight / Date		Amount of Insurance	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".
ABU DHABI	PC1020/28	PC406/28	NIL	

Handling Information
ARTIKEL 137 UZK - DA - NO TAX FREE!!
DE/RA/00255-01 SPX BY KC SECURITY GIVEN BAUMANN 27.11.24 13:36

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)
8	158,0	K	Q		184,0	3,46	636,64	PERSONAL EFFECTS NOT RESTRICTED 3 X 55 X 51 X 31 2 X 70 X 51 X 40 2 X 96 X 51 X 45 1 X 65 X 54 X 33
BATTERIES NOT RESTRICTED AS PER SPECIAL PROVISION A123								
8	**158,0**						**636,64**	TOTAL CBM: **1,103**

Prepaid	Weight Charge	Collect	Other Charges
636,64			
Valuation Charge			
Total other Charges Due Agent			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 descibed by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations.
			PRO SERVICE GMBH MAXIMILIAN BAUMANN Signature of Shipper or his Agent
Total other Charges Due Carrier			

Total prepaid	Total collect	
636,64		FOR ABOVE NAMED CARRIER: PEGASUS AIRLINES PRO SERVICE GMBH, AS AGENT
Currency Conversion Rates	CC Charges in Dest. Currency	20.NOV.2024 85356 MUNICH - DE/RA/00255-01
		Executed on (Date) at (Place) Signature of Issuing Carrier or its Agent

For Carrier's Use only at Destination	Charges at Destination	Total Collect Charges

624-5195 9213

ORIGINAL 2 (FOR CONSIGNEE)

624 | MUC | 52046875 624-52046875

Air Waybill

Shipper's Name and Address: SKYNET WORLDWIDE EXPRESS GERMANY GMBH
BEHRINGSTR. 10,
82152 PLANEGG GERMANY

Shipper's Account Number:

Not Negotiable

Issued by: PEGASUS AIRLINES
AEROPARK YENISEHIR MAH.
OSMANLI BULVARI
ISTANBUL, TURKEY

Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity.

Consignee's Name and Address: GLOBAL SHIPPING LLC
HR. KOCHAR 44/53
YEREVAN ARMENIA
TEL: (+374) 9499 6678

Consignee's Account Number:

It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage 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.

Issuing Carrier's Agent Name and City: TRADELOG
IM TAUBENGRUND 27-29, 65451
KELSTERBACH, GERMANY

Accounting Information:

Agent's IATA Code:

Account No.:

Airport of Departure (Addr. of First Carrier) and Requested Routing: MUNICH

To	By First Carrier	Routing and Destination to	by	to	by
SAW	PC	EVN			

Currency	CHGS Code	WT/VAL PPD	WT/VAL COLL	Other PPD	Other COLL	Declared Value for Carriage	Declared Value for Customs
EUR		X		X		NVD	NCV

Reference Number:

Optional Shipping Information:

Airport of Destination: YEREVAN

Requested Flight/Date: PC1020/28 PC550/28

Amount of Insurance: XXX

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
NOT SECURED CARGO
PLEASE NOTIFY CONSIGNEE IMMEDIATELY UPON ARRIVAL

SCI: X

EVN

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 or Volume)
27	335,41	K	Q	335.5	2,90	972.95	COURIER MATERIAL NOT RESTICTED 40X40X40CM/27
27	335.41	K				972.95	

AHTS GmbH
DE/RA/00418-01
Time: 11 25
AHTS
Signature:
Czekaj a Ingmar
Datum: 26. Nov. 2024
SPX / SHR by
X XRY PHS EDD
ETD VCK

Prepaid	Weight Charge	Collect
	972.95	

Valuation Charge:

Tax:

Other Charges:

Total Other Charges Due Agent:

Total Other Charges Due Carrier:

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.**

TRADELOG, A.CENGIZALP

Signature of Shipper or his Agent

Total Prepaid	Total Collect
972.95	

FOR ABOVE NAMED CARRIER: PEGASUS AIRLINES
TRADELOG, AS AGENT

Currency Conversion Rates	CC Charges in Dest. Currency

27-NOV-2024 KELSTERBACH

Executed on (date) at (place) Signature of Issuing Carrier or its Agent

For Carrier's Use only at Destination	Charges at Destination	Total Collect Charges

624-52046875

AWBEDITOR.COM

Original 2 (for Consignee)

624 MUC 52047962 624 - 52047962

Shipper's Name and Address	Shipper's Account Number	Not Negotiable
ZSU GMBH SUBBELRATHER STRASSE 17 50823 KÖLN GERMANY		**Air Waybill** Issued by PEGASUS Hava Tasiacilgi A.S. Aeropark- Osmanli Bulvari No:11 Kurtkoy 34912Pendik-IstanbulTurkiye
		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	It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage 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.
TDV ADRES TESLIM ADAPAZARI SERDIVAN -MAHMUT KOCAK- PH: 05326703686 00000 SAKARYA TURKEY		
Issuing Carrier's Agent Name and City Rhenus Freight Logistics GmbH & Co. KG Im Hülsenfeld 25 40721 Hilden		Accounting Information
Agent's IATA Code 23-4-7086/4012	Account No.	
Airport of Departure (Addr. of First Carrier) and Requested Routing MUNICH		

To	By First Carrier	Routing and Destination	To	By	To	By	Currency	CHGS Code	WT/VALL PPD	WT/VALL COLL	Other PPD	Other COLL	Declared Value for Carriage	Declared Value for Customs
SAW	PC						EUR		X		X		NVD	NCV

Airport of Destination	Flight/Date	For Carrier Use only	Flight/Date	Amount of Insurance	INSURANCE - If carrier offers insurance, and such an insurance is requested in accordance with the conditions thereof, indicate amount to be insured in figures in box marked 'Amount of Insurance'.
SABIHA GOKCEN AIRP	PC 1020/28			XXX	

Handling Information

EU REG.NR.: DE/RA/00243-03

ONE COFFIN MARKS ADDRESS / LABEL / DOCUMENTS
HS CODE:99190000

Not Secured

SCI STATUS : X

No. of Pieces RCP	Gross Weight	kg lb	Rate Class / Commodity Items No.	Chargeable Weight	Rate / Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
1	138.0	K	M	138.0	455.00	455.00	HUMAN REMAIN OF -MAHMUT KOCAK- (1) 195x65x45 CMS ECS HS CODES: 99190000
1	138.0					455.00	

CHP YOUR WINNING STRATEGY
DE/RA/00228-01 Name Abdül Hamit Kara
27. Nov. 2024

Prepaid	Weight Charge	Collect	Other Charges
	455.00		HRC 40.00

Valuation Charge

Tax

Total Other Charges Due Agent

Total Other Charges Due Carrier
40.00

Time ____ Sing ____
SPX by ____: XRY ____: ETD
____: PHS ____: VCK ____: EDD

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.

Rhenus Freight Logistics GmbH & Co. KG

Signature of Shipper or his Agent

Total Prepaid	Total Collect
495.00	

Currency Conversion Rates	CC Charges in Dest. Currency

26-11-2024 09:21 HILDEN Patricia Schmidt

Executed on (date) at (place) Signature of Issuing Carrier or its Agent

For Carrier's Use only at Destination	Charges at Destination	Total Collect Charges

624 - 52047962
Patricia Schmidt 90111010.029517

Blatt 2: Verbleib bei der/dem Verstorbenen

Todesbescheinigung

- Nicht-vertraulicher Teil -

Personalangaben — BITTE FORMULAR LESERLICH IN DRUCKBUCHSTABEN AUSFÜLLEN UND DABEI FEST AUFDRÜCKEN

Name, ggf. Geburtsname, Vorname: Kocak Mahmut

Straße, Hausnummer: Herrengstr. 10

PLZ, Wohnort: 87700 Memmingen

STANDESAMT MEMMINGEN
KALCHSTRASSE 10
87700 MEMMINGEN
standesamt@memmingen.de

Wird vom Standesamt ausgefüllt

Standesamt: Memmingen

Sterbefall beurkundet, Sterberegisternummer:

Beurkundung zurückgestellt, Nummer: E 758/24

Geburtsdatum: Tag 05 Monat 04 Jahr 1950 — Geburtsort:

Geschlecht: [X] männlich [ ] weiblich [ ] divers [ ] unbekannt

Sterbezeitpunkt: Tag 26 Monat 11 Jahr 2024 — Uhrzeit: Stunden 04 Minuten 28 [X] Nach eigenen Feststellungen [ ] Nach Angaben von Angehörigen/Dritten

Falls Sterbezeitpunkt nicht bestimmbar — Auffindungszeitpunkt: Tag Monat Jahr — Uhrzeit: Stunden Minuten

Noch gelebt/zuletzt lebend gesehen: Tag Monat Jahr — Uhrzeit: Stunden Minuten

Kategorie Sterbeort: [ ] Wohnung [ ] Stat. Pflegeeinrichtung [ ] Stat. Hospiz [ ] Einrichtung der Eingliederungshilfe [ ] Amtl. Gewahrsam [X] Krankenhaus Angabe Station: NC [ ] Sonstiges

Todesart: [X] Natürlicher Tod [ ] Todesart ungeklärt [ ] Anhaltspunkte für einen nicht natürlichen Tod

ACHTUNG! VOR WEITEREM AUSFÜLLEN BITTE DIESE UND DIE VORHERIGE SEITE ABTRENNEN!
(BLATT 1 UND 2 NICHT-VERTRAULICHER TEIL)

Identifikation

[X] Auf Grund eigener Kenntnis [ ] Nach Einsicht in den Personalausweis / Reisepass [ ] Nach Angaben von Angehörigen / Dritten [ ] Nicht möglich

Ort des Versterbens

[X] Sterbeort [ ] Auffindungsort (falls Sterbeort unbekannt)

Straße, Hausnummer (Name des Krankenhauses o. ä.): Bismarckstraße 23 (Klinikum Memmingen)

PLZ, Ort: 87700 Memmingen

[ ] Wohnanschrift (siehe oben)

Warnhinweise

[ ] Herzschrittmacher

[ ] Infektionsgefahr – infektiöse Leiche (Schutzmaßnahmen nach § 7 Abs. 1 Bayerischer Bestattungsverordnung erforderlich)

[ ] Infektionsgefahr – hochkontagiöse Leiche (Schutzmaßnahmen nach § 7 Abs. 2 Bayerischer Bestattungsverordnung erforderlich)

[ ] Chemische Kontamination oder Vergiftung gem. § 16 e ChemG [ ] Radionukleide [X] Sonstiges: recht Bein Platin

Zusatzangaben bei Totgeborenen
(Totgeborene oder in der Geburt gestorbene Leibesfrüchte von mindestens 500 g)

[ ] Als tote Leibesfrucht geboren [ ] In der Geburt verstorben — Schwangerschaftswoche: — Gewicht der Leibesfrucht in g:

Ärztliche Bescheinigung

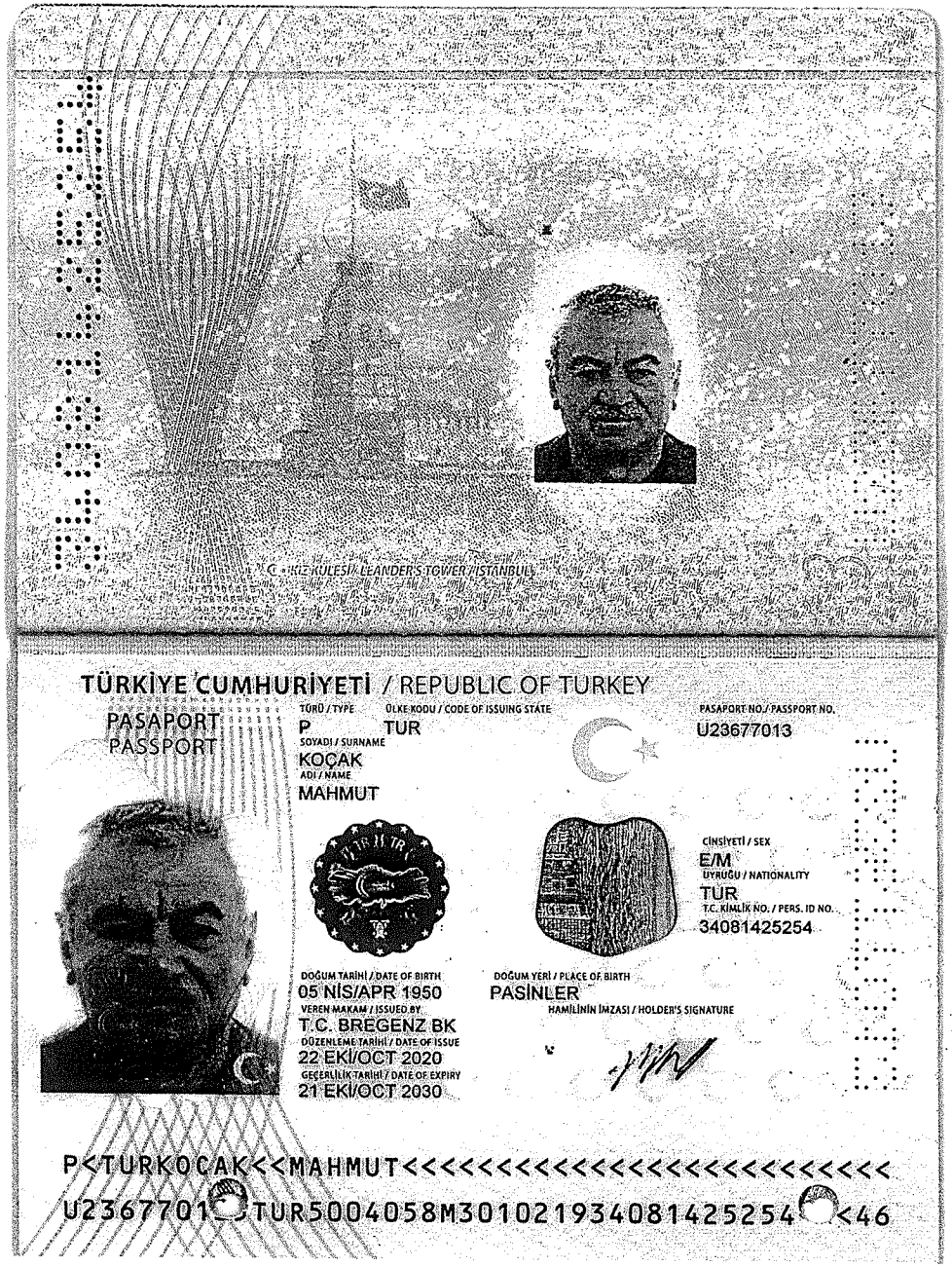
Auf Grund der von mir sorgfältig und an der unbekleideten Leiche durchgeführten Untersuchung bescheinige ich hiermit den Tod und die oben genannten Angaben.

Ort, Datum und Zeitpunkt der Leichenschau: Memmingen 26.11.24 1.LS 500 2.LS 900h

Unterschrift, Name und Telefonnummer (Stempel) der Ärztin/des Arztes

Unbefugte Nachdruck, Nachahmung, Kopieren und elektronische Speicherung verboten!

09/515/0111/03 W. Kohlhammer GmbH (21070) Deutscher Gemeindeverlag GmbH www.kohlhammer.de Bestell-Fax: 0711 7863-8400 E-Mail: dgv@kohlhammer.de


KIZ KULESİ / LEANDER'S TOWER /ISTANBUL
TÜRKİYE CUMHURİYETİ / REPUBLIC OF TURKEY
PASAPORT
PASSPORT
TÜRÜ / TYPE
P
ÜLKE KODU / CODE OF ISSUING STATE
TUR
PASAPORT NO./ PASSPORT NO.
U23677013
SOYADI / SURNAME
KOÇAK
ADI / NAME
MAHMUT
CİNSİYETİ / SEX
E/M
UYRUĞU / NATIONALITY
TÜR
T.C. KİMLİK NO. / PERS. ID NO.
34081425254
DOĞUM TARİHİ / DATE OF BIRTH
05 NİS/APR 1950
DOĞUM YERİ / PLACE OF BIRTH
PASİNLER
VEREN MAKAM / ISSUED BY
T.C. BREGENZ BK
HAMİLİNİN İMZASI / HOLDER'S SIGNATURE
DÜZENLEME TARİHİ / DATE OF ISSUE
22 EKİ/OCT 2020
GEÇERLİLİK TARİHİ / DATE OF EXPIRY
21 EKİ/OCT 2030
P<TURKOCAK<<MAHMUT<<<<<<<<<<<<<<<<<<<<<<<<
U23677013 TUR5004058M3010219340814254 <46

T.C.

Münih Başkonsolosluğu

Sayı : Tereke / 2024 - 282 - 75 27.11.2024

Konu : MAHMUT KOÇAK

CENAZE NAKİL BELGESİ
T.C.
YETKİLİ GÜMRÜK MÜDÜRLÜĞÜNE

Aşağıda kimlik ve ölüm tarihi hakkında gerekli bilgileri verilmiş olan vatandaşımızın cenazesi yurda nakledilmektedir.

Adı ve Soyadı	:	MAHMUT KOÇAK
Doğum yeri ve tarihi	:	PASİNLER - 05.04.1950 - 34081425254
Anne adı - Baba Adı	:	ŞEFİKA-MEMET ALİ
Ölüm tarihi ve yeri	:	26.11.2024 - MEMMİNGEN
Ölüm sebebi	:	DOĞAL ÖLÜM
Bulaşıcı hastalığı	:	YOK
Cenaze naklini üstlenen firma	:	DİTİB ZSU
Gideceği yer	:	SERDİVAN ADAPAZARI SAKARYA
Teslim edilecek kişi	:	TDV ARACI VEYA AİLE YAKINLARI
Nakil günü, vasıtası ve güzergahı	:	28.11.2024 - Uçak ile MÜNCHEN-İSTANBUL

Mevzuat dahilinde gerekli kolaylığın gösterilmesini müsaadelerinize saygılarımla rica ederim.

Murat Kemaloğlu

Konsolos (KİM)

NOT : Otopsi yapılmamıştır

İptal edilen U23677013 seri numaralı pasaportu teslim aldım.

FİRMA YETKİLİSİ :

1	Staat/État/Country	**Bundesrepublik Deutschland**
2	Behörde Administration Authority	Stadtverwaltung Memmingen
3	**Leichenpass** **Carte mortuaire** **Corpse transport permit**	
4	Familienname, Geburtsname Nom de famille, nom de jeune fille/Family name, name at birth	Koçak
5	Vornamen Prénoms/Forenames	Mahmut
6	Geschlecht Sexe/Sex	M
7	Tag und Ort des Todes Date et lieu du décès/Date and place of death	Jo Mo An 26 11 2024 Memmingen
8	Todesursache [1,2] Cause du décès/Cause of death	natürlich
9	Tag und Ort der Geburt Date et lieu de naissance/Date and place of birth	Jo Mo An 05 04 1950 Pasinler, Türkei
10	Beförderungsmittel Mode de transport/Means of transport	Leichenkraftwagen/Flugzeug
11	Abgangsort Lieu de départ/Place of dispatch	Memmingen (D)
12	Strecke Route/Route	München (D) - İstanbul (TR)
13	Bestimmungsort Lieu de destination/Destination	Sakarya - Serdivan, Türkei
14	Die Beförderung dieser Leiche wurde ordnungsgemäß genehmigt. Alle Behörden der Staaten, durch deren Hoheitsgebiet die Leiche befördert werden muss, werden deshalb gebeten, den Transport ungehindert passieren zu lassen. Étant donné que le transfer du corps est autorisé, toutes les autorités des pays sur le territoire desquels le transport circulera sont priées de le laisser se déplacer librement et de ne pas entraver sa circulation. Permission has been granted for the transport of this corpse. All authorities in the countries/states through which the remains are to be transported are, therefore, requested to allow it to pass freely and unhindered.	
15	Tag und Ort der Ausstellung Date et lieu de délivrance/Date and place of issue	Jo Mo An 27 11 2024 Memmingen

Unterschrift/Signature/Signature

Siegel/Sceau/Seal

STANDESAMT BAYERN MEMMINGEN

1 Die Angabe der Todesursache ist nur zulässig, wenn der Bestattungspflichtige sein Einverständnis erklärt hat; sie ist auch in Englisch und Französisch anzugeben oder im WHO-Zahlencode für die internationale Klassifizierung der Krankheiten.

2 Ist die Angabe der Todesursache nicht möglich, so ist auf dem Leichenpass anzugeben, ob die Person eines natürlichen Todes oder an einer nicht ansteckenden Krankheit verstorben ist. Starb die Person an einer ansteckenden Krankheit, so sollte diese Tatsache angegeben werden. Falls die Todesursache aus Gründen der ärztlichen Schweigepflicht nicht offen angegeben werden soll, ist eine ärztliche Bescheinigung mit der Angabe der Todesursache in einem verschlossenen Umschlag beizufügen.

SYMBOLES/ZEICHEN/SYMBOLS/SIMBOLOS/ΣΥΜΒΟΛΑ/SIMBOLI/SYMBOLEN/SÍMBOLOS/IŞARETLER/SIMBOLI/SIMBOLIAI/SÜMBOLID/SIMBOLURI

Jo: Jour/Tag/Day/Día/Ημέρα/Giorno/Dag/Dia/Gün/Dan/Diena/Päev/Zi

Mo: Mois/Monat/Month/Mes/Μήν/Mese/Maand/Mês/Ay/Mesec/Miesiąc/Mėnuo/Lună/Kuu/Lunã

An: Année/Jahr/Year/Año/Ετος/Anno/Jaar/Ano/Yıl/Godina/Metai/Aasta/An

M: Masculin/Männlich/Masculine/Masculino/Αρρεν/Maschile/Mannelijk/Masculino/Erkek/Muški/Vyras/Mees/Masculin

F: Féminin/Weiblich/Feminine/Femenino/Θήλυ/Femminile/Vrouwelijk/Feminino/Kadın/Ženski/Moteris/Naine/ Feminin

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1	Staat/Estado/Κράτος/Stato/Staat/Estado/Devlet/Država/Państwo/Valstybė/Riik/Statul
2	Behörde/Autoridad/Αρχή/Autorità/Overheidsinstantie/Autoridade/Resmi makam/Vlast/Urząd/Įstaiga/Ametiasutus/Autoritatea
3	Leichenpass/Pasaporte para cadaver/Αδεια μετάφορας αωρού/Passaporte mortuario/Lijkepas/Autorização de transporte de cadaver/Ölü Geciş Belgesi/Mrtvački pasoš/Zezwolenie na przewóz zwłok/Lavono pasas/Laibapass/Bilet de însoţire a cadavrului
4	Familienname, Geburtsname/Apellidos, apellidos de soltera(o)/Επώνυμο, πατρικό επώνυμο/Cognome, cognome di nascita/Achternaam, geboorte-naam/Apelido, nome de solteira/Soyadı, Doğum soyadı/Prezime rođeno ime/Nazwisko, nazwisko rodowe/Pavardė, pavardė pagal gimimo liudijimą/Perekonnanimi, sünnijärgne perekonnanimi/Numele, numele la naştere
5	Vornamen/Nombre propio/Ἀνᾳματα/Prenomi/Voornamen/Nome próprio/Adı/Ime/Imiona/Vardai/Eesnimed/Prenumele
6	Geschlecht/Sexo/Φυλον/Sesso/Geslacht/Sexo/Cinsiyeti/Pol/Płeć/Lytis/Sugu/Sex
7	Tag und Ort des Todes/Fecha y lugar de la defunción/ΧρονολογΑα καΑ τᾳπος Θανςτου/Data e luogo della morte/Datum en plaats van overlijden/Data e lugar do óbito/Ölüm tarihi ve yeri/Datum i mjesto smrti/Data i miejsce zgonu/Mirties data ir vieta/Surmaaeg ja -koht/Data şi locul decesului
8	Todesursache/Causa de la defunción/αιτΑα θανςτου/Causa della morte/Doodsoorzaak/Causa da morte/Ölüm nedeni/Uzrok smrti/Przyczyna zgonu/Mirties priežastis/Surma põhjus/Cauza decesului
9	Tag und Ort der Geburt/Fecha y lugar de nacimiento/όρονολογΑα καΑ τᾳπος γεννᾶσεως/Data e luogo di nascita/Geboortedatum en -plaats/Data e lugar do nascimento/Doğum yeri ve tarihi/Datum i mesto rodjenja/Data i miejsce urodzenia/Gimimo data ir vieta/Sünniaeg ja -koht/Data şi locul naşterii
10	Beförderungsmittel/Medio de transporte/Μέσο μεταčορςς/Mezzo di trasporto impiegato/Transportmiddel/Meio de transporte/Nakil vasıtası/Prijevozno sredstvo/Środek transportu/Transportavimo priemonė/Transportimisviis/Mijloc de transport
11	Abgangsort/Lugar de salida/Τᾳπος εκκινησεως/Luogo di partenza/Plaats van vertrek/Lugar de expediçáo/Gönderildiği yer/Mjesto polaska/Miejsce wywozu/Išvežimo vieta/Lähtekoht/Punctul de plecare
12	Strecke/Trayecto/μέσω/Percorso/Route/Trajecto/Yol/Udaljenost/Trasa przewozu/Maršrutas/Teekond/Ruta
13	Bestimmunsgort/Lugar de destino/ακριčᾶ τᾳπο προορισμοć/luogo di destinazione/Plaats van bestemming/Lugar de destino/Gideceği yer/Odredište/Miejsce przeznaczenia/Atvežimo vieta/Sihtkoht/Punctul de sosire
14	Die Beförderung dieser Leiche wurde ordnungsgemäß genehmigt. Alle Behörden der Staaten, durch deren Hoheitsgebiet die Leiche befördert werden muss, werden deshalb gebeten, den Transport ungehindert passieren zu lassen./El transporte de este cadáver fue autorizado reglamentariamente. Por lo tanto, se ruega a todas las autoridades dejar transitar el cadáver sin impedimentos por sus respectivos territorios de jurisdicción./Δεδομένου ότι για την μεταφορά της παρούσης σωρού έχει χορηγηθεί χδεια, παρακαλούνται οι Αρχές των χωρών επί του εδάφους των οποίων θα πραγματοποιηθεί η μεταφορά να την επιτρέψουν ακωλύτως και ελευθέρως./Il trasporto di questo cadavere é stato regolarmente autorizzato. Tutte le autoritá degli stati attraverso i quali il cadavere viene trasportato sono dunque pregate di non ostacolare in alcun modo il transito della salma./Er is voor het vervoer van dit lijk volgens voorschrift vergunning verleend. Alle overheidsinstanties van de staten door wier grondgebied het lijk vervoerd dient te worden, worden daarom verzocht het transport ongehinderd te laten passeren./Como este transporte de cadáver está autorizado, solicita-se a todas as autoridades oficiais dos países por cujo território o transporte deverá ser efectuado que o deixem passar livremente./Bu cesedin nakline usuller çerçevesinde izin verilmiştir. Cesedin nakliyatının geçmesi gereken ülkelerin bütün resmi makamlarından nakliyatın yapılmasına engel çıkartılmaması rica olunur./Prijevoz ovog mrtvaca je uredno odobren. Stoga se svi organi vlasti zemalja, preko čijeg područja se mora prevesti mrtvac, mole, da odobre nesmetani prijevoz./Na przewóz tych zwłok wydano pozwolenie zgodnie z przepisami. Dlatego prosi się wszystkie urzędy państw, przez których terytorium zwłoki będą musiały być przewiezione, o umożliwienie bezproblemowego transportu./Šio lavono pervežimui buvo suteiktas leidimas. Prašome visų valstybių įstaigas, per kurių teritorijas bus transportuojamas lavonas, netrukdyti šio lavono pervežimui./Surnukeha transportimise kohta on väljastatud nõuetekohane luba. Nende riikide, mille territooriumil surnukeha transporditakse, kõiki ametiasutusi palutakse transportimist mitte takistada./Transportul acestui cadavru a fost autorizat. De aceea, toate autoritățile statelor pe teritoriul cărora se desfășoară transportul sunt rugate să permită trecerea liberă a acestuia.
15	Tag und Ort der Ausstellung, Unterschrift, Siegel/Fecha y lugar de expedición, firma, sello/Χρονολογία και τόπος έκδόσεως, ὑπογραφή, σφραγίδα/Data e luogo del rilascio, firma, bollo/Datum en plaats van afgifte, handtekening, zegel/Data e lugar de emissão, assinatura, selo/Veriliş tarihi ve yeri, Imza, Mühür/Datum i mjesto izdavanja, potpis, pečat/Data i miejsce wystawienia, podpis, pieczęć/Išdavimo data, parašas, antspaudas/Väljastamise päev ja koht, allkiri, pitser/Ziua şi locul emiterii, semnătura, ştampila

Dieser Leichenpass ist nach den Bedingungen des europäischen Übereinkommens für die Überführung von Leichen, insbesondere der Art. 3 und 5 (vgl. den folgenden Auszug) ausgestellt und entspricht dem Internationalen Abkommen über die Leichenbeförderung (Berliner Abkommen vom 10. Februar 1937, RGBl. II, S. 199).

Europäisches Übereinkommen über die Überführung von Leichen (Auszug)

Artikel 3

1. Jeder Leiche muss während der Überführung ein besonderes Dokument *(Leichenpass)* beigegeben werden, die von der zuständigen Behörde des Absenderstaates ausgestellt wird.

2. Der Pass muss wenigstens die in dem als Anlage zu diesem Übereinkommen beigefügten Muster aufgeführten Angaben enthalten; er ist in der Amtssprache oder einer der Amtssprachen des Ausstellungsstaates und in einer der Amtssprachen des Europarates abzufassen.

Artikel 5

Der Pass wird von der zuständigen Behörde, auf die in Artikel 8 dieses Übereinkommens Bezug genommen wird, ausgestellt, nachdem sie sich vergewissert hat:

a) dass alle ärztlichen, gesundheits- und verwaltungsmäßigen sowie rechtlichen Forderungen der in dem Absendestaat gültigen Regelungen betreffend die Leichenbeförderung und – wenn angebracht – die Beisetzung und die Ausgrabung erfüllt worden sind;

b) dass die Überreste in einen Sarg gelegt worden sind, der die in Artikel 6 und 7 dieses Übereinkommens aufgestellten Forderungen erfüllt;

c) dass der Sarg nur die Überreste der in dem Pass genannten Person und solche persönlichen Gegenstände enthält, die mit der Leiche beigesetzt oder eingeäschert werden sollen.

European Agreement on the Transfer of Corpses (excerpt)

Article 3

1. Any corpse shall, during the transfer, be accompanied by a special document (*laissez-passer* for a corpse) issued by the competent authority of the state of departure.

2. The laissez-passer shall include at least the information set out in the model annexed to the present agreement; it shall be made out in the official language or one of the official languages of the state in which it was issued and in one of the official languages of the Council of Europe.

Article 5

The laissez-passer is issued by the competent authority referred to in article 8 of this agreement, after it has ascertained that:

a) all the medical, health, administrative and legal requirements of the regulations in force in the state of departure relating to the transfer of the corpses and, where appropriate, burial and exhumation have been complied with;

b) the remains have been placed in a coffin which complies with the requirements laid down in articles 6 and 7 of this agreement;

c) the coffin only contains the remains of the person named in the laissez-passer and such personal effects as are to be buried or cremated with the corpse.

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