

076	MIL	41988623	41988623	076/41988623
Shipper's Name and Address  CRASTA e CO. SRL CORSO GARIBALDI 367 80142 NAPOLI		Shipper's Account Number 04731530632		<b>Not Negotiable</b>  <b>Air Waybill</b> MIDDLE EAST AIRLINES AIRLIBIAN  issued by M.E.A. S.A.L. VIA BISSOLATI 76 00187 ROMA
		NA - IT 081/5549980		
Consignee's Name and Address  NAVIGATORS S.A.R.L. MEDAWAR BLDG 6TH FLOOR PO BOX 175179 - import@navigators-lb.com ph:9611570571* - LB BEIRUT LEBANON		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 GIVE 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 gghier value for carriage and paying a supplemental charge if required.
Issuing Carrier's Name and City CRASTA e CO. SRL CORSO GARIBALDI 367 80142 - NAPOLI (NA)		Accounting Information  NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X		
Agent's IATA Code 38471310010		Account No.		
Airport of Departure (Addr. Of First Carrier) and Requested Routing MILAN			Codice Fiscale/Partita Iva del mittente	
IMPRENDITORE Non Imprenditore PF <input checked="" type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>				
To	By First Carrier	Routing and destination	to	by
BEY	MEA /GLOBE			
Currency EUR		CHGS Code X	WT/VOL COLL X	Other COLL X
Declare Value for Carriage N.V.D.		Declare Value for Customs N.C.V.		
Airport of Destination BEIRUT		Flight/Date ME9999/02+ME0212/05	Amount of Insurance 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' ASSICURAZIONE - Qualora il Vettore offra una assicurazione e tale assicurazione sia richiesta in base alle condizioni indicate a tergo, indicare l'importo da assicurare in cifre nella casella 'importo assicurato'	
Handling Information ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS NOTIFY:SAME A SCONSIGNEE				
				SCI
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.
1	103.40	K		
			Chargeable Weight	Rate
			104.00	3.16
				Charge
				328.64
1	103.40		104.00	328.64
Prepaid Weight 328.64		Collect Valuation Charge		Other Charges Insurance Premium
		Tax		Special Handling
Total Other Charges Due Agent 0.00		Total Other Charges Due Carrier 19.42		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 property described by name and is in proper condition for ccarriage by air according to the applicable Dangerous Goods Regulations. Il mittente dichiara che le indicazioni contenute sul fronte LTA sono esatte e che qualora una parte della spedizione contenga merci pericolose tale parte è debitamente indicata ed è nelle condizioni richieste ai fini del trasporto per via aerea secondo le norme sulle Merci Pericolose.
Total Prepaid 348.06		Total Collect		CRASTA e CO. SRL Signature of Shipper or his Agent
Currency Conversion Rates		CC Charges in Dest. Currency		EXA2400676
For Carriers use Only at Destination		Charge at Destination		Executed on 27/06/2024 MIL (Date) at (Place)
		Total collect Charges		



**CASS ITALY**

**ORIGINAL 3 (FOR SHIPPER)**

**076/41988623**