

016	LIN	29037341	29037341	016/29037341	
Shipper's Name and Address		Shipper's Account Number		<b>Not Negotiable</b> <b>Air Waybill</b> UNITED AIRLINES INC issued by P.O. BOX 66100 CHICAGO - ILLINOIS - USA 66100 CHICAGO - USA Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity	
IWCL ITALY VIA C.COLOMBO 10/A 20066 MELZO MI - IT					
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 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 ghigher value for carriage and paying a supplemental charge if required.	
IWCL USA INC. 500 7TH AV FL 8 10018 - NEW YORK NY - US +1 6465619391 @ATTN JAMS DING					
Issuing Carrier's Name and City		Accounting Information			
IWCL ITALY SRL VIA CRISTOFORO COLOMBO 10 (PAL.A) 20066 - MELZO (MI)		NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X			
Agent's IATA Code		Account No.			
38471310010					
Airport of Departure (Addr. Of First Carrier) and Requested Routing		Codice Fiscale/Partita Iva del mittente		Imprenditore Non Imprenditore PF <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>	
LINATE					
To	By First Carrier	Routing and destination	to	by	to
SFO	UNITED AIRLINES INC.				
Currency	CHGS Code	WT/VAL	Other	Declare Value for Carriage	
EUR		PPD COLL	PPD COLL	N.V.D.	
		X	X	N.C.V.	
Airport of Destination		Flight/Date For Carrier Use Only		Amount of Insurance	
SAN FRANCISCO		UA5810/11-UA0506/14		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 New Charter SRL has reviewed all available documentation and has determined that none of the cargo being offered in this consignment or consolidation has originated in, transferred from, or transited through any point in Egypt, Somalia, Syria or Yemen.					
					SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Chargeable Weight	Rate
4	372.00	K	Commodity Item No.	928.00	Charge 2.30
NOTIFY: SAME AS CNEE FREIGHT PREPAID					
4	372.00			928.00	2134.4
					5.568 CBM
Prepaid		Weight		Other Charges	
		2134.4		P.B.A. Fee	
Valuation Charge		Insurance Premium			
Tax		Special Handling			
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 property described by name and is in proper condition for ccarriage by air according to the applicable Dangerous Goods Regulations.			
0.00		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 Other Charges Due Carrier		IWCL ITALY TAMARA			
28.44		Signature of Shipper or his Agent			
Total Prepaid		Total Collect			
2162.84					
Currency Conversion Rates		CC Charges in Dest. Currency		11/10/2024 LIN	
				Executed on (Date) at (Place)	
For Carriers use Only at Destination		Charge at Destination		Total collect Charges	



CASS ITALY

ORIGINAL 3 (FOR SHIPPER)

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