

NEC	SWK	01509948	/	<b>NEC01509948</b>
Shipper's Name and Address  SIAD SPA SOC. ITALIANA ACETILENE E DERIVATI 24126 BERGAMO BG - IT TE:035328111 VIA S. BERNARDINO 92		Shipper's Account Number		<b>Not Negotiable</b>  <b>Air Waybill</b>  issued by  Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity
Consignee's Name and Address  SMART-HOSE TECHNOLOGIES 701 ASHLAND AVE. BLDG N.22 SUITE 11 19032 - FOLCROFT PA - US PH:215-730-9000		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 gghigher value for carriage and paying a supplemental charge if required.
Issuing Carrier's Name and City  - ()				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 <b>SEGRATE</b>				Codice Fiscale/Partita Iva del mittente  Imprenditore <input checked="" type="checkbox"/> Non Imprenditore <input type="checkbox"/> PF <input type="checkbox"/> SD <input checked="" type="checkbox"/>
To	By First Carrier	Routing and destination	to	by
PHL				
Currency	CHGS Code	WT/VOL	Other	
EUR		PPD COLL	PPD COLL	
		X	X	
Declare Value for Carriage		Declare Value for Customs		
N.V.D.		N.C.V.		
Airport of Destination <b>PHILADELPHIA</b>		Flight/Date <b>KL8820/08+KL0641/10+AF0115/11</b>		Amount of Insurance  <small>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"</small> <small>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"</small>
Handling Information <b>ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS</b> <b>CONTACT REF. SHELLI COLEMAN</b> <b>PHONE: 215-730-9000 EXT. 100</b>				
				SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.
1	158.00	K		
DAP TERMS - DAP TERMS - DAP TERMS				
FREIGHT PREPAID				
1	158.00			
Prepaid		Weight		Collect
AS AGREED				
Valuation Charge				
Tax				
Total Other Charges Due Agent				
0.00				
Total Other Charges Due Carrier				
0.00				
Total Prepaid		Total Collect		
Currency Conversion Rates		CC Charges in Dest. Currency		
For Carriers use Only at Destination		Charge at Destination		Total collect Charges

**CASS ITALY**

ORIGINAL 3 (FOR SHIPPER)

**NEC/01509948**