

NEC	SWK	01510046	/	NEC01510046																
Shipper's Name and Address TD S.R.L. VIALE DEL LAVORO 41/A-15 37036 SAN MARTINO BUON ALBERGO VR - IT			Shipper's Account Number		Not Negotiable Air Waybill issued by															
					Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity															
Consignee's Name and Address A.S. BY C., INC 1800 WEST LOOP SOUTH 77027 - HOUSTON TX -			Consignee's Account Number TX - US		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.															
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 SEGRATE					Codice Fiscale/Partita Iva del mittente					Imprenditore Non Imprenditore PF <input type="checkbox"/>		SD <input checked="" type="checkbox"/>								
To	By First Carrier	Routing and destination		to	by	to	by	Currency	CHGS Code	WT/VAL	PPD	COLL	PPD	COLL	Declare Value for Carriage		Declare Value for Customs			
MCO								EUR		X		X			N.V.D.		N.C.V.			
Airport of Destination ORLANDO			Flight/Date LH7525/19+LH0068/20		For Carrier Use Only		Flight/Date		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																			SCI X	
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.	Chargeable Weight	Rate	Total	Nature and Quantity of Goods (incl. Dimensions or Volume) GUESTHOUSE BUILT-IN FILLERS AND SHELF HS CODE: 9403509080, 9403910080 PACKAGES: 1 CRATE GROSS WEIGHT: KG.560 FREIGHT PREPAID Dims:1/301x75x117 <div style="text-align: right;">2.641 CBM</div>												
1	560.00	K			560.00	AS AGREED														
FREIGHT PREPAID																				
1	560.00				560.00															
Prepaid Weight Collect AS AGREED					Other Charges AS AGREED					P.B.A. Fee										
Valuation Charge					Insurance Premium AS AGREED															
Tax					Special Handling															
Total Other Charges Due Agent 0.00					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 Other Charges Due Carrier 0.00																				
Total Prepaid					Total Collect					TD S.R.L. <div style="text-align: right;">Signature of Shipper or his Agent</div>										
Currency Conversion Rates					CC Charges in Dest. Currency					18/11/2024 SWK Executed on (Date) at (Place)										
For Carriers use Only at Destination					Charge at Destination					Total collect Charges										

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ORIGINAL 3 (FOR SHIPPER)