

ECR	SWK	24011073	057/72274484	ECR24011073				
Shipper's Name and Address SHE srl VIA APPIA SUD KM 17,900 80029 Sant'Antimo NA - IT 081 8332477		Shipper's Account Number 03059071211		Not Negotiable Air Waybill CRASTA e CO. SRL issued by CORSO GARIBALDI 367 NAPOLI Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity				
Consignee's Name and Address ADB & COMPANY LLC 3650 NW 82ND AVE, SUITE 401 33166 - DORAL		Consignee's Account Number FL - 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 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 Name and City CRASTA e CO. SRL CORSO GARIBALDI 367 - NAPOLI ()		Accounting Information SPOT: SP-207428-63176706						
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"/> <input checked="" type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>				
To LAX	By First Carrier AIR FRANCE	Routing and destination	to by to by	Currency CHGS WT/VAL Other Code PPD COLL PPD COLL EUR X X Declare Value for Carriage N.V.D. Declare Value for Customs N.C.V.				
Airport of Destination LOS ANGELES		Flight/Date AF0531/07+AF0020/09	For Carrier Use Only	Flight/Date				
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								
				SCI				
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)
1	232.00	K	PREPAID SAME AS CONSIGNEE		232.00	3.27	758.64	GENERAL CARGO, HAIR EXTENSIONS WITH KERATIN AND HAIR PRODUCTS REF. COMM. INVOICE SHE 281/E HS CODE: 67042000 1 PKG, 232 KG Dims:1/120x80x105 1.008 CBM
1	232.00				232.00		758.64	
Prepaid		Weight		Collect		Other Charges		
		758.64				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 properly described by name and is in proper condition for carriage 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.		
		0.00						
		Total Other Charges Due Carrier				SHE srl Signature of Shipper or his Agent		
		0.00						
		Total Prepaid		Total Collect				
		758.64						
Currency Conversion Rates		CC Charges in Dest. Currency		03/10/2024 SWK				
				Executed on (Date) at (Place)				
For Carriers use Only at Destination		Charge at Destination		Total collect Charges				



CASS ITALY

ORIGINAL 3 (FOR SHIPPER)

ECR/24011073