

NEC	MXP	01510730	/	NEC01510730									
Shipper's Name and Address LA LEONESSA S.P.A. VIALE SANTA MARIA 90 25013 CARPENEDOLO BS - IT TEL.+ 39030996543 SALES@LALEONESSA.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 LA LEONESSA OF NORTH AMERICA INC. 450 E. 96TH STREET SUITE 500 - INDIANAPOLIS IN 46240 - US TEL:(317) 975-2110		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.									
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.		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"/>									
Airport of Departure (Addr. Of First Carrier) and Requested Routing MALPENSA MILAN AIRPORT, ITALY													
To	By First Carrier	Routing and destination	to	by	to	by	Currency	CHGS Code	WT/VAL PPD COLL	Other PPD COLL	Declare Value for Carriage	Declare Value for Customs	
ORD							EUR		X	X	N.V.D.	N.C.V.	
Airport of Destination CHICAGO		Flight/Date BA3480/18+BA025/19		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 ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS													
												SCI X	
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	580.00	K			580.00	AS AGREED		SLEWING RINGS PACKAGES: 1 PACKAGE GROSS WEIGHT: KG.580 FREIGHT PREPAID Dims:1/150x150x35					
1	580.00				580.00			0.787 CBM					
Prepaid AS AGREED			Weight Collect		Other Charges AS AGREED			P.B.A. Fee					
Valutation 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					LA LEONESSA S.P.A.								
Total Prepaid					Total Collect					Signature of Shipper or his Agent			
Currency Conversion Rates					CC Charges in Dest. Currency					14/02/2025 MXP Executed on (Date) at (Place)			
For Carriers use Only at Destination					Charge at Destination					Total collect Charges			

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CASS ITALY

ORIGINAL 3 (FOR SHIPPER)