020	MXP	19564381		19564381		020/19564381

Shipper's Name and Address	Shipper's Account Number
LEONARDO SPA HELICOPTER DIVISION LOGISTIC CENTRE -PRODUCT SUPPORT 21029 VERGIATE VA - IT +39 3475622725 VIA CASCINA NUOVA 100	

Not Negotiable

Air Waybill issued by

LUFTHANSA LINEE AEREE GERMANICHE SPA
VON GABLENZ STRASSE COLOGNE CORSO MATTEOTTI, 1
20121 MILANO

Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity

Consignee's Name and Address	Consignee's Account Number
THOMAS SMITH PB GROUP HEAD OFFICE, LEVEL 3 POLIDANO GROUP BUILDINGS TRIQ HAL FARRUG, 3078 - LUQA, - MT +356 99431363	

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
LOGAERO VIA SAPONARA 614 00125 - ROMA (RM)	NOT CEE TRAFFIC STATUS DOG X NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG C

Agent's IATA Code	Account No.
38471310010	

Airport of Departeure (Addr. Of First Carrier) and Requested Routing	Codice Fiscale/Partita Iva del mittente	Imprenditore Non Imprenditore PF	
MALPENSA MILAN AIRPORT,ITALY		X	SD X

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
MLA	LUFTHANSA						EUR		X	X	N.V.D.	N.C.V.

Airport of Destination	Flight/Date 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 nelle casella 'Importo assicurato'
MALTA	LH0255/15+LH1310/16		

Handling Information

ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS
24-HOUR EMERGENCY CONTACT TELEPHONE NUMBER +39-0331-664444
DANGEROUS GOODS AS PER ASSOCIATED SHIPPER'S DECLARATION

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 FREIGHT PREPAID	33.00	M			36.00	67.14	67.14	UN 2795 BATTERIES, WET, FILLED WITH CLASS 8 OF PI 870 HS CODE: 8807300030 Dims:1/80x60x45
1	33.00				36.00		67.14	0.216 CBM

Prepaid	Weight	Collect	Other Charges	P.B.A. Fee
	67.14			

Valutation 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. 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	
130.71	LEONARDO SPA HELICOPTER DIVISION Signature of Shipper or his Agent

Total Prepaid	Total Collect	
197.85		

Currency Conversion Rates	CC Charges in Dest. Currency	11/04/2025 MXP
		Executed on (Date) at (Place)

For Carriers use Only at Destination	Charge at Destination	Total collect Charges

020/19564381

CASS ITALY   ORIGINAL 3 (FOR SHIPPER)