235	MXP		63625251								6362		235/63625251											
Shipper	s Name and Add	Iress	Shipper's Account Number								Not Ne													
											Air Way	/bill	Т	UR	KIS	SH AI	RLI	NES	- TUR	K HA	VA YC	LLAI	RI A	.0.
S.A.L.F. S.P.A. LABORATORIO FARMACOLOGICO VIA MARCONI 2 24069 CENATE SOTTO BG - IT TEL +39 035 940097						7	,			issued		VIA BARBERINI,47 00187 ROMA												
											Copies 1	s Air Waybill are originals and have the same validity												
Consignee's Name and Address Consignee's Account Number SAUDI ARABIAN DRUG STORE CO LIMITED EAST OF HIGHWAY, WAREHOUSES AEREA, - JEDDAH 21411, ** - SA +966505593284 .EASTERN SALMANIYA											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 INPATH LOGISTIC GROUP SRL											Accounting Information													
VIA DI FRANCIA 7/I										- 1	NON VALE FATTURA AI FINI IVA													
16149 - GENOVA ITALY (GE)											NOT CEE TRAFFIC STATUS DOG X KEEP REFRIGERATED BETWEEN +15 TO +25 DEGREES CELSIUS PHARMA PASSIVE, NON-STACKABLE													
Agent's IA	ATA Code	- 1	Accoun	t No.																				
384713																								
Airport of Deparature (Addr. Of First Carrier) and Requested Routing											Codice Fiscale/Partit			a Iva del mittente				Imprenditore Non			mprendit		PF [
MALPENSA MILAN AIRPORT, ITALY To By First Carrier Routing and to						by to			у	Currency	CHGS		VT/VAL		Other		1 🗠	lue for Carriage	riage	Declare \		SD L	ms	
			\	destination	ŀ				1	•		Code	PPD COL		L PF	PPD COLL								
JED	TURKISH AI	RLINE	-								EUR		Х	INSUR	X			V.D.	nd such insura	nce is requ	N.C.V.		the condi	itions
JEDDA Handling In	H AIRPORT,S	AUDI	Flight/		For Carri 0094/		Only	F	light/Date	е	Amount of	Insurance		ASSIC	CURA	ZIONE - Qu	alora il	/ettore offra	ures in box mar una assicuraz o da assicurare	zione e tale	assicurazione			alle
CELSIU: +15°C DATA LO No of Pieces RCP	JS ALL TIME I C AND +25°C _OGGER INSI Gross Weight	DURIN	NG TF erial r	RANSPORT	ATIO	N AN 1762	ID S -01- geable ht	TORA S1250	071762-0		DDS AT	071762-03 Total		LLED .		ETWEEN +15 TO +25 DEGREES TEMPERATURE BETWEEN Nature and Quantity of Goods (incl. Dimensions or Volume) PHARMACEUTICALS HS CODE: 30043900 GOODS AT CONTROLLED TEMPERATURE BETWEEN +15ŰC AND +25ŰC DATA LOGGER INSIDE, Serial numbers, S125071762-01- S125071762-02- S125071762-03 Dims:18/120x80x150 HS CODE: 30043900						_		
18 5927.00 Prepaid Weight Collect							27.00				10787	P.B.A. Fee						25.92 CBM						
10787.14							ł	er Charges 71,12 M		G 4 >	XB 57,6 PA 30 AW 20 GT 71				2		Р.Б.	A. Fee						
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Total Other Charges Due Agent 0.00 Total Other Charges Due Carrier							con acc	tains dar ording to ittente di	ngerous the ap ichiara	s goo plical che le	ods, such ible Dange le indicazio	ars on the f part is properous Good oni contenuarte è debit	perty Is Re ute su	descr gulation	ribe ions ite L	d by na s. _TA sor	ame no es	and is	in proper che qual	r condi	tion for d	carriaç ella sp	ge by edizio	air one
258.34							_	via aerea secondo le norme sulle Merci Pericolose. S.A.L.F. S.P.A. LABORATORIO FARMACOLOGICO FILE Signature of Shipper or his Agent									E EM/2	5/013	85					
_	Total Prepaid			Total Colle	ect	_	+						oignati	ire of S	onip	per or hi	s Age	ΠŢ						—
11045.48						_									_									_
Curre	ncy Conversion Ra	Charges in Des	1	10/2025		MXI		(Place																
For Carrie	rs use Only at Des	tination	Charge at Destination					Total	collect		rges		*)						~ - ·				_	

