618	MXP	4	44202885					44202885			618/44202885						
Shipper's	Name and Addres	SS	Shipper's Account Number					Not Negotiable									
								Air Way	bill	S	SINGAPORE AIRLINES CARGO PTE LTD						
SKYLINE SRL PIAZZA SAN FRANCESCO 1 21047 SARONNO VA - IT 027256641									,				RLINE HOUSE, 25 AIRLINE ROAD NGAPORE 819829				
21047 S PROVA		II (	)27256641					Copies 1,	2 and 3 o	f this	Air W	aybill a	re or	iginals and have the	e same vali	idity	
Consignee's Name and Address Consignee's Account Number								It is agreed that the goods described herein are accepted in apparent good order and condition (except a									
SKYLINE SRL PIAZZA SAN FRANCESCO 1 21047 - SA VA - AD 027256641								noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. A GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIE UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVE HEREON BY THE SHIPPER, AND SHIPPI AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHIT THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTIC CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability declaring a ghigher value for carriage and paying a supplemental charge if required.									
issuina C	arrier's Name and	Citv						Account	ing Infori	matio	n						
SKYLINE SRL								NON VALE FATTURA AI FINI IVA									
PIAZZA SAN FRANCESCO 1 21047 - SARONNO (VA)								NOT CEE TRAFFIC STATUS DOG X PROVA ACCOUBTIN G INFO									
Agentic 147	TA Code		accust No					4									
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Airport of Deparature (Addr. Of First Carrier) and Requested Routing								Codice Fiscale/Partita Iva del mittente									
MALPENSA MILAN AIRPO			,			by to by		Currency CHGS Code			WT/VAL Other PPD COLL PPD COLL			Dedlare Value for Carr	age Decl	SD are Value for Cust	
BNE	SINGAPORE A	IRLIN						EUR		x		x		N.V.D.	N.C	S.V.	
Airport of Destination Flight/Date For Carrier Use C BRISBANE LH125/2					Only	Flight/Date Amount of Insurance			nsurance	INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with the conditio thereot, indicate amount to be insured in figures in box marked 'amount of insurance' ASSICURAZIONE - Qualora II Vettore offra una assicurazione e tale assicurazione sia richiesta in base a condizioni indicate a tergo, indicare l'importo da assicurare in offer nelle casella 'importo assicurato'							
No of Pieces RCP	Gross Weight Kg	)	Rate Class Chargeable Rate Commodity Weight Item No.			/	Charge			X Nature and Quantity of Goods (incl. Dimensions or Volume)							
1 250.00 K PROVA COPRPO POLIZZA 1 PROBVAV 2 PORVA 3 LALALALALALALALA NOTIFY: PIPPO PIAZZA SAN FRANCESCO 1		ILALA	ALALALAL			250.00				169		PR PR PR	AVC AVC AVC				
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						20/05/2025 MXP Executed on (Date) at (H					e)						
For Carriers	s use Only at Destina	tion	Charge at Desti	ination			ollect Ch								0/4	00000	
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ORIGINAL 3 (FOR SHIPPER)