176	MXP	7836544						0783	176/07836544														
Shipper'	s Name and Add	Iress	Shipper's Account Number							Not Neg													
			01416040127							Air Way	Air Waybill E				ES								
ROTODYNE SRL VIA IV NOVEMBRE 5 21042 CARONNO VA - IT +39029602270										issued		VIA MARIO BIANCHINI, 47 00142 ROMA											
Consignee's Name and Address Consignee's Account Number										Copies 1	Copies 1, 2 and 3 of this Air Waybill are originals and have the same							validity					
TIME V PLAZA - VILLA	vORLD FREIG BLDG.,OFFIC AGE TE:971-4			ARGO		It is agreed that the goods described herein are accepted in apparent good order and condition (excended) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF.  GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARL UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVE HEREON BY THE SHIPPER, AND SHIF AGREES THAT THE SHIPPENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WITHE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NO CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liabilideclaring a ghigher value for carriage and paying a supplemental charge if required.										ALL RIER PPER HICH TICE							
Issuing Carrier's Name and City LOGAERO SERVICES ITALY SRL VIA SAPONARA 614 00125 - ROMA (RM)										Accounting Information  NOT CEE TRAFFIC STATUS DOG X  NON VALE FATTURA AI FINI IVA													
Agent's IATA Code Account No. 38471310010																							
Airport of Deparature (Addr. Of First Carrier) and Requested Routing										Codice F	iscale/Partita	a Iva	Iva del mittente Imprenditore N										
MALPENSA MILAN AIRPORT, ITALY  To By First Carrier Routing and destination to						by	y	to	by	Currency	CHGS Code	WT/VAL PPD COLL P			Other D CC		edlare Valu	ue for Cari	Carriage Declare Value		SD /alue for Cu	stoms	
DXB	EMIRATES									EUR		Х		X		N	.V.D.			N.C.V.			
Airport of Destination Flight/Date For Carrier Use C DUBAI EK0092/27  Handling Information						Use Or	nly	Flig	ght/Date	Amount of	Amount of Insurance				INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with the thereof, indicate amount to be insured in figures in box marked amount of insurance! ASSICURACNE - Cuulora I better offer una assicurazione et alse assicurazione sia richiesta in condicioni indicate a tergo, indicare l'importo da assicurare in cifre nelle casella "Importo assicurato"								
																					SCI X		
No of Pieces RCP	Gross Weight	Kg lb	Rate	Class Commodity Item No.		harge /eight			Rate	Charge 2.89	Total			(incl. E			e and Quantity of Goods Dimensions or Volume)			ATTAQUE	<u> </u>		
'	265.00					200.00			2.09					CONSOLIDATED SHIPMENT AS PER ATTACHED CARGO MANIFEST HYDRAULIC TEST STAND HS CODE: 90312000									
1	265.00					26	65.00		-			765.85				1.074 CBM							
Prepaid Weight Collect								Charges								P.E	.A. Fee						
765.85 Valutation Charge								Insurance Premium															
Тах																							
1dA							Special Handling																
Total Other Charges Due Agent 0.00  Total Other Charges Due Carrier							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													y air ione			
65.11							via a		ondo le n	arte è debita Merci Perico											XX		
Total Prenaid Total Callea										Signature of Shipper or his Agent													
\	Total Prepaid	330.96	\	Total Collec	$\overline{}$																		
Curre	ncy Conversion Ra		<u>√cc </u>	Charges in Dest	_		5/2025		ΧP														
For Carrie	ers use Only at Dest	ination	Charge at Destination				Execu	Total o	ollect Ch	ate) at arges	(F	Place)											

