

ETR SWK 00000302 057/54622352 ETR00000302

Shipper's Name and Address UNILOY ITALY S.R.L. VIA ALESSANDRINI, 43 20013 MAGENTA MI - IT +39 029700071 info2@uniloy.com	Shipper's Account Number 13261110152	Not Negotiable Air Waybill TRANS SERVICE SA issued by VIA BROGEDA, 3 CHIASSO
	Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity	

Consignee's Name and Address UNILOY INC. 5550 OCCIDENTAL HWY -SUITE B 49286 - TECUMSEH MI - US T: 718-244-8290 e-mail: parts-eu@uniloy.com	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 higher value for carriage and paying a supplemental charge if required.
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Issuing Carrier's Name and City TRANS SERVICE SA VIA BROGEDA, 3 - CHIASSO	Accounting Information NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X
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Agent's IATA Code 38471310010	Account No.
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Airport of Departure (Addr. Of First Carrier) and Requested Routing SEGRATE	Codice Fiscale/Partita Iva del mittente	Imprenditore Non Imprenditore PF <input type="checkbox"/> <input checked="" type="checkbox"/> SD <input checked="" type="checkbox"/>
To DTW By First Carrier AIR FRANCE Routing and destination to by to by	Currency EUR CHGS Code WT/VAL PPD COLL Other PPD COLL	Declare Value for Carriage N.V.D. Declare Value for Customs N.C.V.

Airport of Destination DETROIT	Flight/Date For Carrier Use Only Flight/Date AF0531/24+AF6730/26+AF0016/28	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 offre 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'
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Handling Information	SCI X
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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	217.00	K			217.00	AS AGREED		GUIDE CARRIAGE RAIL SIZE 45 Hs code 8477 9010 00 NOTIFY: First Express Logistics Inc. 152-24 Northern Blvd, 3rd floor Flushing, NY 11354 e-mail james.lee@firstexpressus.com - Tel. 718-244-8290 Dims:1/480x25x35
1	217.00				217.00			0.42 CBM

Prepaid AS AGREED	Weight	Collect	Other Charges AS AGREED	P.B.A. Fee
Valuation 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 carriage by air according to the applicable Dangerous Goods Regulations.	
Total Other Charges Due Carrier 0.00			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 Prepaid			UNILOY ITALY S.R.L. Signature of Shipper or his Agent	
Total Collect				
Currency Conversion Rates		CC Charges in Dest. Currency	18/02/2025 SWK	
			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)