eLO	MXP		0000	00001					0	20/545	eLO00000001											
Shipper	's Name and Add	Iress	Shipper's Account Number							Not Neg	-											
										Air Waybill LOGAE					AERO SERVICES ITALY SRL							
VIA MA	A PROVA PRO AMELI 169 E GALLARATE V		VITTORIO VENETO 5 -ANZI 6 029603303							issued by			VIA SAPONARA 614 ROMA									
Consignee's Name and Address Consignee's Account Number											Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity											
LOGAERO VIA MAZZINI 20 34121 - TRIESTE TS - AD										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 LOGAERO SERVICES ITALY SRL VIA SAPONARA 614 - ROMA ()										Accounting Information												
Agent's IATA Code Account No. 38471310010																						
Airport of Deparature (Addr. Of First Carrier) and Requested Routing										Codice Fi	a Iva	l <u>—</u>				1	ore Non	Imprendito	re PF			
MALPENSA MILAN AIRPORT,ITALY To By First Carrier Routing and to								to	by	Currency	CHGS		VAL	Other			X ediare Value fo	r Carriage	Declare Va	SD lue for C		
NRT	LUFTHANSA	A		destination						EUR	Code	X	COLL	Х			.V.D.		N.C.V.			
Airport of Destination Flight/Date For Carrier Use 0								Fliq	ght/Date	Amount of I	INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with the condition thereof, indicate amount to be insured in figures in box marked 'amount of insurance' ASSICURAZIONE - Outloan il Vettore offir and assicurazione e tate assicurazione sia richiesta in base all											
NARITA - TOKYO Handling Information																	Vettore offra una as icare l'importo da ass				base alle	
No of Pieces RCP	Gross Weight 250.00	Kg lb				Charge: Weight	nt			Charge GREED	Total		(incl				ure and Quantity of Goods d. Dimensions or Volume)					
1 250.00							25	0.00			0.77 CBM											
Prepaid Weight Collect AS AGREED								Charges GREED	,							P.B	.A. Fee					
Valutation Charge								nsurance Premium														
Tax								AS AGREED Special Handling														
100								ai mandiin	ig													
Total Other Charges Due Agent 0.00 Total Other Charges Due Carrier 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 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. PROVA PROVA PROVA Signature of Shipper or his Agent															
	Total Prepaid		Total Collect							J .3.0			,	9	•							
Curre	ncy Conversion Ra	tes /	CC Charges in Dest. Currency /				14/0F	5/2025	M	ΧP	P											
`								ted on	(Da	ate) at	(Place)										
For Carrie	ers use Only at Des		Charge at Destination				Total	collect Cha	arges							. ^	1000					

