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Shipper'	s Name and Add	ress	Shipper's Account Number							Not Ne											
			00733070247							Air Way	ybill	MAC SHIPPING ITALY SRL									
GARDEN ORNAMENTS STONE S.R.L.											issued by V			VIA DEL GREGGE, 100							
VIALE EUROPA, 29											L	LONATE POZZOLO									
	THIENE VI - I				Conice 4. 2 and 2 of this Air-MAI 1 199																
	SOS.GARDEN® S Name and Address					Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity									lidity						
			İ							It is agreed that the goods described herein are accepted in apparent good order and condition (noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HERE											
105 Bl 28801	TONE STUDIO JCHANAN AVE - ASHEVILLE DCUTSTONES					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 SHIPPE AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHILE 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.									PER IICH IICE						
•	Carrier's Name ar									Accounting Information											
MAC SHIPPING ITALY SRL										NON VALE FATTURA AI FINI IVA											
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- LONA	ATE POZZOLO																				
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Airport of Deparature (Addr. Of First Carrier) and Requested Routing										Codice F	del r	mittente Imprenditore Non Imprenditor						enditore PF	\neg		
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То	By First Carrier	`		Routing and destination	to	by	to		by	Currency	CHGS Code	WT/		Oth PPD		Dec	lare Value i	for Carriage	Dec	lare Value for Cust	oms
CLT	AMERICAN A	AIRLINI	ES IN	c.						EUR			Х		Х	N.	V.D.		N.C	C.V.	
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Airport of Destination Fight/Date For Carrier Use 0 CHARLOTTE NC AA0299/11JUN AA3139/12											Amount of Insurance		ASSIC	URAZION	ndicate amount to be insured in figures in box marked 'amount of insurance' RAZIONE - Qualora if Vottore offra una assicurazione e tale assicurazione sia richiesta in base alle il indicate a tergo, indicare l'importo da assicurare in olfre nelle casella 'Importo assicurato'						e alle
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	Total Prepaid			Total Collect	1													_			
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