eSK			0000	01990		172/02044545			eSK00001990										
Shipper's	Name and Add	dress	Shipper's Account Number						Not Neg										
			02385090028						Air Way	SKYLINE SRL									
test						issued	PIAZZA SAN FRANCESCO 1												
dwqdq									SARONNO										
ł	T 033118319	992																	
l	UNA INFO Name and Address		Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity																
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 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																
test									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										
32131	A.D. 004040	40			CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by														
a-aa- 	AD 231313	13							declaring a ghigher value for carriage and paying a supplemental charge if required.										
Issuing C	Carrier's Name a	ınd City	,						Accounting Information										
SKYLIN																			
Į.	SAN FRANC																		
- SARC	DNNO																		
Agent's IA	TA Code	4																	
3847131		ľ	Accoun	1110.															
Airport of	Deparature (Addr.	Of First	Carrier)) and Requested	Codice Fiscale/Partita Iva del mittente Imprenditore Non Imprenditore PF									ditore PF					
																	SD X		
То	By First Carrier	Ì		Routing and destination	to	by	to	by	Currency		WT/VAL PD CO		Other PD COI		dlare Value fo	or Carriage	Declare	e Value for Customs	
JFK	CARGOLUX	AIRLIN	NES IN	NTERN. SA					EUR		X		X	N.	V.D.		N.C.	V .	
Airport of De	estination		Flight/	Date Fc	Only	Flig	ht/Date	Amount of I	nsurance						a, and such insurance is requested in accordance with the conditi figures in box marked 'amount of insurance'				
NEW Y	ORK		1	ASSICURAZIONE - Qualora il Vettore offra una assicurazione e tal condizioni indicate a tergo, indicare l'importo da assicurare in cifre ne						le assicurazio	one sia richiesta in base alle								
Handling Inf																			
SONO UNA HANDLING SCI														SCI					
No of	Gross Weight	Kg	Rate	Class	geable Rate			Total					Quantity of						
Pieces RCP		lb		Commodity V			Weight		Charge				(incl. Dimensions or Volume)						
1	1 200.00 K					200.00 AS A		AS AC	GREED			Dims:0/0x0x0							
1	200.00		•			2	00.00					1							
Prep	aid	Weight		Colle	ect	Othe	r Charges												
				AS AGI	REED		AGREED												
_		Valutation	Charge		nsurance Premium AS AGREED														
		Ta	ıx				ial Handling												
						***** *** *													
	Total C											the consignment							
					acco	ording to t	he applic	able Dange	rous Goods	Regula	tion	S		·			,		
	Total C	ther Char	arges Due Carrier 0.00				Il mittente dichiara che le indicazioni contenute sul fronte LTA sono esatte e che qualora una parte della spediz contenga merci pericolose tale parte è debitamente indicata ed è nelle condizioni richieste ai fini del trasporto												
			0.00				via aerea secondo le norme sulle Merci Pericolose. test												
							Signature of Shipper or his Agent												
	Total Prepaid		Total Collect																
Currer	ncy Conversion Ra	tes	CC Charges in Dest. Currency				0/2025									-			
	•						uted on		ate) at	lace)									
For Carrie	s use Only at Des	tination	Charge at Destination				Total	collect Ch	arges										

