

Shipper's Name and Address				Shipper's Account Number				Not negotiable <b>Air Waybill</b> (Air Consignment note) ISSUED BY <b>ETIHAD AIRWAYS</b>															
ALIVIRA ANIMAL HEALTH LIMITED 301, PLOT NO.E/7,DOSTI PINNACLE ROAD NO.22 WAGLE INDUSTRIAL ESTATE THANE WEST-400604 MAHARASHTRA INDIA								Copies 1,2 and 3 of the 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 CONTRACTION THE REVERSE HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN 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 of carriage and paying a supplemental															
BREMER PHARMA GMBH WERKSTRASSE 42, 34414 WARBURG-SCHERFEDE,- HAMBURG, GERMANY TEL. NO.: (05642)9809-0								Accounting Information <b>FREIGHT PREPAID</b> Notify1:- <b>BREMER PHARMA GMBH</b> <b>WERKSTRASSE 42,</b> <b>34414 WARBURG-SCHERFEDE,-</b> <b>HAMBURG, GERMANY</b> <b>TEL. NO.: (05642)9809-0</b>															
Issuing Carrier's Agent Name and City				Agents IATA Code				Account No.				Declared Value For Carriage <b>NVD</b>  Declared Value For <b>NCV</b>											
<b>SKYLINK FREIGHT FORWARDERS PVT LTD</b> <b>Mumbai/+91 22 66473700</b>				14-3-4416																			
Airport of Departure (Addr. of first Carrier) and requested Routing												Currency						CHGS		WT/VAL		Other	
MUMBAI AIRPORT												INR		PP		PPD X		COLL		PPD X		COLL	
To	By First Carrier	Routing and Destination		To	By	To	By	INR		PP		PPD X		COLL		PPD X		COLL					
AUH		EY		FRA	EY																		
Airport of Destination				Flight/Date				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											
FRANKFURT AIRPORT, GERMANY								XXX															
Handling Information																							
PLEASE INFORM CONSIGNEE IMMEDIATELY ON ARRIVAL OF CARGO MARKS & NO.: TOLDIMFOS SODIUM FRANKFURT AIRPORT ORIGIN : INDIA 1612800619 TOTAL 16 (SIXTEEN) EXPORT WORTHY DRUMS ONLY																							
SCI																							
No. of Pieces RCP	Gross Weight	Kg	Lb	Rate Class Commodity Item No.	Chargeable Weight	Rate	Charge	Total	Nature and Quantity of Goods (Incl. Dimension or Volume)														
16	456.620	K	Q		500.0	108.00		54000.00	TOLDIMFOS SODIUM														
INV NO.: 1612800619 DT.: 31.12.2018 SHIPPER'S NON-DGR CERTIFICATE ATTACHED S/B NO:									DIMNS.: CMS 16=42x42x64														
16	456.620							54000.00															
Prepaid				Weight Charge				Collect				Other Charges											
54000.00												AWB : 150.00, PCA : 250.00, LBC : 100.00, CCF : 600.00											
Valuation Charge																							
Tax												MCC : 500.00, CTG : 457.00, SCR : 1000.00, MSC : 28500.00, C G C : 133.00											
Total other Charges Due Agent												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 properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Registrations.  <b>SKYLINK FREIGHT FORWARDERS PVT LTD</b>  Signature of Shipper or his Agent											
1100.00																							
Total other Charges Due Carrier																							
30590.00																							
Total Prepaid				Total Collect								As Agents only for <b>ETIHAD AIRWAYS</b>											
85690.00																							
Currency Conversion Rates				cc charges in Dest Currency																			
For Carrier Use Only at Destination				Charges at Destination				Total Collect Charges				Executed On (Date) at (Place) Signature of Issuing Carrier or its Agent											