020	BOM	50	76 50	13												
Shipper's	Name and Address	3			oper's Acc	ount Nur	mber	Not negotiable Air Waybill LU			UFT	IAH	NSA CA	RGO		
	O REMEDII			_ \^D					(Air Consignment note)							
	ACRUZ (EAS				NDIA				ISSU	JED BY						
							Copies 1,2 and 3 of the Air Waybill are originals and have the same validity.									
Consigned	e's Name and Addi	ess			Consi	ignee's Ac	count Nu	ımber	It is agreed that the goods described herein are accepted in apparent good order and condition (except a noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACTION THE REVERSE HEREOF							
	CENT PHAF 3/4 QUIDH						ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVEN HEREON BY TH									
	AMPTON LA	SHIPPER, AND SHIPPER AGREE STOPPING PLACES WHICH THE					THE C	ARRIER	DEEMS APPR	OPRIATE. T	THE SHIPPER'S ATTENTION					
	SHIRE RG2 0125677273		_	6772740				IS DRAWN TO TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABI increase such limitation of liability by declaring a higher value of carriage and paying a suppl								
	arrier's Agent Name			00772740			Accounting Information									
_	INK FREIG	_	RDERS F	D			FREIGHT PREPAID Notify1:-									
Mumb	ai/+91 22 66	47370	00						,		PHARM	MA LIM	IITED			
Agents IA	TA Code			Account	No.		UNITS 3/4 QUIDHAMPTON E									
14-3-4416 3301BOM Airport of Departure (Addr. of first Carrier) and requested Routing									UNITS POLHAMPTON LANE,OVERTON, HAMPSHIRE RG25 3ED UK							
	Departure (Addr. o N AIRPORT, I		arrier) and	requested Routii	ng											
To FRA	By First Carrier		Routing and	d Destination	To LHR	By LH	То	Ву	Currency	CHGS Code PP	PPD CO		COLL	Declared Value F		Declared Value For NCV
Airport of Destination LONDON, UNITED KINGDOM LH:8361 Flight/Dat							10/01/2	2019	Amo	Amount of Insurance			SURANCE - If Carrieroffers insurance ans such insurance quested in accordance with the conditions thereof, Indicate amount to tesured in figures in box marked Amount of Insurance			
Handling		INFC	DRM CC	NSIGNEE	IMMED		Y ON	ΔΡΡΙ\/Δ		RGO		Illisureu	iii iiqui e	3 III DOX IIIai Red 7	Amount of mis	urance
	(S & NO.: CI										TON NO	O:1- 43	35		ī	
	OF PALLETS						ON 2	0 (TWEN	TY) PAL	LETS (ONLY.					SCI
No. of Pieces RCP	Gross Weight						R	ate	harge	Total			Nature and Quantity of Goods (Incl. Dimension or Volume)			
					V	ol.Wt.	Nt.		\neg				METRONIDAZOLE 200MG			
20	2809.748 K Q 33					3368	3.0	1	49.00 50		50183	2.00	TABLETS PACKS OF 3X7			
			ш													
			ш													
// TEN	PERATURE 1	5 TO 1	35 DECE	DEE CEI SII	10 //											
SB.NO.		25 DEGI	VEL CLESIC							DIMN	C · CMC					
	OGGER KEP [*] ORDER NO.				28/11/2	2017	17					DIMNS.: CMS 1=122x82x130,				
						20/11/2	2011						1=122x82x85,2=120x80x40, 16=122x82x108			
SHIPPE	R NON HAZ	CERT	TIFICATE	ATTACHEE)							_	10=12	22X82X1U8		
20	2809.74	8									501832.0	00				
\ Pre	oaid/∖ 50183		eight Charg	e /_	Collec		Other CI		OCA - 250	00 IB0	· 150 0	n cce	. 725	00 001+01	1 · 300 00	
	\		uation Char	ge <u>/</u>		AWB: 150.00, PCA: 250.00, LBC: 150.00, CCF: 725.00, AAI+CM: 300.00										
	\		Tax			MCC: 3368.00, CTG: 2810.00, MRC: 229024.00, SCR: 10104.00, CGC: 75.00										
	\Tot	al other	r Charges D	ue Agent		Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains										
	157	5.00				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.										
	\		Charges D	ue Carrier	_											
	24030	1.00					SKYLINK FREIGHT FORWARDERS PVT LTD									
			4			Signature of Shipper or his Agent										
\	Total Prepaid 74878	8.00	_/ _	Total Co	/										As Agents only for	
Curre	ency Conversion F		_/_	cc charges in D	cy /	08	-Jan-2019			MUME	BAI				LUFTHANSA CARGO	
							Execute	ed On (Date)		at (Pla	ce)	Si	gnature	of Issuing Carrie	er or its Agent	

Total Collect Charges

020-5076 5013

For Carrier Use Only at Destination

Charges at Destination