

Shipper's Name and Address LLC GREENSTONE PO LTD AS TRUSTEE OF THE GREENSTONE TRUST RPH CONSULTING LEVEL 1 LAMBTON QUAY WELLINGTON 6011 NEW ZEALAND		Shipper's account Number		Not negotiable <b>Air Waybill</b> issued by Uzbekistan Airways 41 Movarounnakh Tashkent Uzbekistan 700060			
Consignee's Name and Address LLC VITA-ORTA COMPANY STR. LETCHIKA BABUSHKINA, 1 BLDG. 3, FLOOR 6, OFFICE 6 MOSCOW 129344 RUSSIAN FEDERATION		Consignee's account Number		Copies 1,2 and 3 of this Air Waybill are originals and have the same validity			
Issuing Carrier's Agent Name and City VIP FREIGHT LIMITED 2 COLNDALE ROAD COLNBROOK SL3 OHQ		Accounting Information SHP REF: 17400 AGT REF: AXJ002610 REF: SL17					
Agent's IATA Code 99965050006		Account No.					
Airport of Departure (Addr. of first Carrier) and requested Routing LONDON HEATHROW AIRPORT		Reference Number		Optional Shipping Information			
To TAS	By first carrier Uzbekistan Airways	Routing and Destination DME	To DME	By HY	To By		
Currency	CHGS Code	WT/VAL PPD X COLL X	Other PPD X COLL X	Declared Value for Carriage N.V.D.	Declared Value for Customs N.C.V.		
Airport of Destination DOMODEDOVO INTERNATIONAL AIRPORT		Flight/Date HY0202/19	For Carrier Use only Flight/Date HY0601/20	Amount of Insurance XXX	INSURANCE - If carrier offers insurance and such insurance is requested in accordance with conditions thereof, indicate amount to be insured in figures in box marked 'amount of insurance'.		
Handling Information KNOWN CARGO		NOTIFY:LLC VITA-ORTA COMPANY STR. LETCHIKA BABUSHKINA, 1 BLDG. 3, FLOOR 6, OFFICE 6 MOSCOW SCI CT = 'T1'					
No. of Pieces RCP	Gross Weight	Kg Lb	Rate Class. Commodity Item No.	Chargeable Weight	Rate Charge	Total	Nature and Quantity of Goods (inc. Dimensions or Volume)
1	38.0	K	Q	45.0	1.50	67.50	PARTS FOR OF UPPER AND LOWER LIMB PROSTHESES *** NOT RESTRICTED *** CONTAINS LITHIUM-ION BATTERIES IN COMPLIANCE WITH SECTION II OF PACKING INSTRUCTION 967. DIMENSIONS :- 1 @ 80 X 61 X 53 CM
24H PHONE NUMBER: ++ 44 (0)1256 316664	THE PACKAGE CONTAINS LITHIUM ION CELLS OR BATTERIES OR LITHIUM METAL CELLS OR BATTERIES. THE PACKAGE MUST BE HANDLED WITH CARE AND THAT A FLAMMABILITY HAZARD EXISTS IN CASE OF DAMAGE. SPECIAL PROCEDURES MUST BE FOLLOWED IN THE EVENT THAT THE PACKAGE IS DAMAGED, TO INCLUDE INSPECTION AND REPACKING IF NECESSARY.						
1	38.0					67.50	
Prepaid 67.50		Weight Charge		Collect		AIRLINE HANDLING (C) 30.90 AWB FEE (C) 25.00 LITHIUM-ION BATTERY CHECK (C) 40.00	
Valuation Charge							
Tax							
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 Good Regulations.	
Total other Charges Due Carrier 95.90						VIP FREIGHT LIMITED AS AGENTS FOR THE CARRIER UZBEKISTAN AIRWAYS	
Signature of Shipper or his Agent							
Total Prepaid 163.40		Total Collect					
Currency Conversion Rates		cc Charges in Dest. Currency		19/JAN/2024 COLNBROOK SL3 OHQ		PIRAGAS THURAISAMY	
For Carrier's use only at Destination		Charges at Destination		Total Collect Charges		Executed on (Date) at (Place) Signature of issuing Carrier or its Agent	

Shipper's Name and Address LLC GREENSTONE PO LTD AS TRUSTEE OF THE GREENSTONE TRUST RPH CONSULTING LEVEL 1 LAMBTON QUAY WELLINGTON 6011 NEW ZEALAND		Shipper's account Number		Not negotiable <b>Air Waybill</b> issued by Uzbekistan Airways 41 Movarounnakh Tashkent Uzbekistan 700060			
Consignee's Name and Address LLC VITA-ORTA COMPANY STR. LETCHIKA BABUSHKINA, 1 BLDG. 3, FLOOR 6, OFFICE 6 MOSCOW 129344 RUSSIAN FEDERATION		Consignee's account Number		Copies 1,2 and 3 of this Air Waybill are originals and have the same validity			
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Airport of Destination DOMODEDOVO		Flight/Date HY0202/19	For Carrier Use only Flight/Date HY0601/20	Amount of Insurance XXX	INSURANCE - If carrier offers insurance and such insurance is requested in accordance with conditions thereof, indicate amount to be insured in figures in box marked 'amount of insurance'.		
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For Carrier's use only at Destination		Charges at Destination		Total Collect Charges		Executed on (Date) at (Place) Signature of issuing Carrier or its Agent	

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Consignee's Name and Address LLC VITA-ORTA COMPANY STR. LETCHIKA BABUSHKINA, 1 BLDG. 3, FLOOR 6, OFFICE 6 MOSCOW 129344 RUSSIAN FEDERATION		Consignee's account Number		Received in good order and condition At _____ on _____ Place Date / Time Signature of Consignee or his Agent			
Issuing Carrier's Agent Name and City VIP FREIGHT LIMITED 2 COLNDALE ROAD COLNBROOK SL3 OHQ		Accounting Information SHP REF: 17400 AGT REF: AXJ002610 REF: SL17					
Agent's IATA Code 99965050006		Account No.					
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Airport of Destination DOMODEDOVO		Flight/Date HY0202/19	For Carrier Use only Flight/Date HY0601/20	Amount of Insurance XXX	INSURANCE - If carrier offers insurance and such insurance is requested in accordance with conditions thereof, indicate amount to be insured in figures in box marked 'amount of insurance'.		
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<b>Agent's IATA Code</b> 99965050006		<b>Account No.</b>					
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<b>CHGS Code</b> PPD X		<b>WT/VAL</b> COLL X		<b>Other</b> PPD X		<b>Declared Value for Carriage</b> N.V.D.	
<b>Declared Value for Customs</b> N.C.V.							
<b>Airport of Destination</b> DOMODEDOVO		<b>Flight/Date</b> HY0202/19	<b>For Carrier Use only</b> Flight/Date HY0601/20	<b>Amount of Insurance</b> XXX		<b>INSURANCE</b> – If carrier offers insurance and such insurance is requested in accordance with conditions thereof, indicate amount to be insured in figures in box marked 'amount of insurance'.	
<b>Handling Information</b> KNOWN CARGO				<b>NOTIFY:</b> LLC VITA-ORTA COMPANY STR. LETCHIKA BABUSHKINA, 1 BLDG. 3, FLOOR 6, OFFICE 6 MOSCOW			
				<b>SCI</b> CT = 'T1'			
<b>No. of Pieces RCP</b> 1	<b>Gross Weight</b> 38.0 K	<b>Kg Lb</b> K	<b>Rate Class.</b> Q	<b>Chargeable Weight</b> 45.0	<b>Rate</b> 1.50	<b>Charge</b> 67.50	<b>Total</b> 67.50
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