

# NASEX

NAS EXPRESS COURIERS L.L.C. - U.A.E

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TRN # 100200615100003



\* 6 0 2 5 2 4 8 5 6 \*

(Tracking / Waybill Number)

|                                                                                                                                                                                                                                                                                                                                                                                                                                               |                         |                     |                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------------------|--------------------|
| ACCOUNT NUMBER                                                                                                                                                                                                                                                                                                                                                                                                                                | ORIGIN                  | DESTINATION         | CUSTOMER REFERENCE |
|                                                                                                                                                                                                                                                                                                                                                                                                                                               | Dubai                   |                     |                    |
| 1 CONSIGNOR DETAILS                                                                                                                                                                                                                                                                                                                                                                                                                           |                         | 2 CONSIGNEE DETAILS |                    |
| COMPANY NAME                                                                                                                                                                                                                                                                                                                                                                                                                                  | COMPANY NAME            |                     |                    |
| SENDER'S NAME                                                                                                                                                                                                                                                                                                                                                                                                                                 | RECEIVER'S NAME / DEPT. |                     |                    |
| ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                       | ADDRESS                 |                     |                    |
| TEL.: 0551906177                                                                                                                                                                                                                                                                                                                                                                                                                              | MOB:                    |                     |                    |
| 4 SENDER'S AUTHORIZATION AND SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                     |                    |
| THIS IS A NON-NEGOTIABLE AIRWAY BILL ALL SERVICES PROVIDED ARE SUBJECT TO THE TERMS & CONDITIONS ON THE REVERSE OF THE AIRWAY BILLS COPY. BY SIGNING THIS AIRWAY BILL, THE CONSIGNOR ACKNOWLEDGES THAT HE/SHE HAS READ THESE CONDITIONS AND AGREES TO BE BOUND BY EACH OF THEM WITH FULL KNOWLEDGE AND CONSENT THAT THESE ARE ENFORCEABLE OBLIGATORY OF THE CONSIGNOR. I/We understand that NASEX does not transport cash or dangerous goods. |                         |                     |                    |
| SENDER'S SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                            |                         |                     |                    |
| DATE                                                                                                                                                                                                                                                                                                                                                                                                                                          | TIME                    | AM / PM             | TIME               |
| COLLECTED BY                                                                                                                                                                                                                                                                                                                                                                                                                                  | DATE                    | / /                 | DELIVERED BY       |
| NAME & SIGN.                                                                                                                                                                                                                                                                                                                                                                                                                                  | TIME                    | AM / PM             | NAME & SIGN.       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                               | TIME                    | AM / PM             | TIME               |
| 3 SERVICE INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |                     |                    |
| <input type="checkbox"/> DOMESTIC EXP. <input type="checkbox"/> GLOBAL EXP.                                                                                                                                                                                                                                                                                                                                                                   |                         |                     |                    |
| <input type="checkbox"/> DOCUMENT <input type="checkbox"/> NON DOC.                                                                                                                                                                                                                                                                                                                                                                           |                         |                     |                    |
| <input type="checkbox"/> TRANSPORT <input type="checkbox"/> OTHERS                                                                                                                                                                                                                                                                                                                                                                            |                         |                     |                    |
| NO OF PACKAGES                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                     |                    |
| WEIGHT                                                                                                                                                                                                                                                                                                                                                                                                                                        |                         | KILOS               | GRAMS              |
| VOLUMETRIC/CHARGED WEIGHT                                                                                                                                                                                                                                                                                                                                                                                                                     |                         | L                   | W H                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                               |                         |                     | KG                 |
| 5 PAYMENT MODE                                                                                                                                                                                                                                                                                                                                                                                                                                |                         | 6 CHARGES           |                    |
| <input type="checkbox"/> CASH                                                                                                                                                                                                                                                                                                                                                                                                                 |                         | COURIER CHARGE      |                    |
| <input type="checkbox"/> PREPAID                                                                                                                                                                                                                                                                                                                                                                                                              |                         | VAT 5%              |                    |
| <input type="checkbox"/> ACCOUNT                                                                                                                                                                                                                                                                                                                                                                                                              |                         | TOTAL               |                    |
| <input type="checkbox"/> C.O.D.                                                                                                                                                                                                                                                                                                                                                                                                               |                         |                     |                    |
| 7 CUSTOMER INSTRUCTION                                                                                                                                                                                                                                                                                                                                                                                                                        |                         |                     |                    |
| CONSIGNOR COPY                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                     |                    |

Any dispute regarding shipment Delivery/COD & Material cost should be clarified within 15 days from the shipment date.