

Airway Bill Details



Shipping Mode

 Auto

Airway Bill Date

16-01-2026

Airway Bill No.

5314739

Payment Mode

Cash on Deliver

Customer (Alt+C)



copy address to shipper

AIR

Consignor/Shipper Details

Consignor Name

Telephone No.

Consignee Name

Telephone No.

Contact Person

Mobile No.

Contact Person

Mobile No.

Flat/Building

Area/Land Mark

Flat/building

Area/Land Mark

Pincode

Origin Location(Alt+L)

Pincode

Destination Location(Alt+N)

Origin City

Origin Country

Destination City

Destination Country

Shipment Details

Cost Updation

Description <input type="button" value="..."/>	Pieces	Weight	Invoice.value	Currency	Cr.Chg	Oth.Chg <input type="button" value="..."/>	<input type="checkbox"/> Tax + 5 %
	0	0	0.00	Dir	0.00	0.00	0
Movement Type	Product Type	Parcel Type	<input type="checkbox"/> S.chg %		Mat.Cost	Total	
Domestic	Domestic	Select			0	0.00	0.00
Forwarding Agent Details				Shipper Instructions		Courier Details	
Length	Width	Height	Verified. Wt.	Spot Rate	Margin%	Picked By	Created By
(((0	0.00	0.00	RAYEES.msf	RAYEES.msf 16-Jc
Forwarding Agent	Forw. Rate	Forw.Aagt.No	<input type="checkbox"/> NCND		<input type="checkbox"/> Cash Only	Received By	Modified By
Highway Express	0.00		<input type="checkbox"/> Cheque Only		<input type="checkbox"/> Collect Material	Select	RAYEES.msf 16-Jc
Manifest Weight	Remarks	<input type="checkbox"/> DOCopyBack					
0							