

Airway Bill



Sender Name: **Santosh Yadav**

Address: 6/12 Chander Shaker Society, Mumbai
MAHARASHTRA-400069

Contact Number: 9833563411

Courier Vendor:Test

Service: Test

Pickup Date:_____

Time: _____

Emp. Code: _____

Signature: _____

Receiver Name: P. H Yadav

Address: A-5 Balaji Town Kheli Ghatak, Kota
RAJASTHAN-324001

Contact Number: 9928061807

Airway Bill Number: 1234aweq

| |
|-----------------------|
| Unique Number: 121212 |
|-----------------------|

Package Count: 1

Total Weight: 1

| | |
|----------------------|----------|
| Purpose of Shipment: | NOT_SOLD |
|----------------------|----------|

Package Details: Documents

