

HOUSE AIR WAYBILL

No: XXXXXX

Shipper (Name and Address)

Consignee (Name and Address)

Issuing Agent (Name and Address)

Airport of Departure	Airport of Destination	Flight(s) / Date	Currency	Declared Value for Carriage	Declared Value for Customs	Amount of Insurance

Marks & Numbers	No. of Packages	Description of Goods	Gross Weight	Measurement

Freight & Charges	Prepaid	Collect
Other Charges		

Handling Information:

Accounting Information:

Signature of Issuing Carrier or Its Agent