

# NEUTRAL AIR WAYBILL

AWB NUMBER:

Date:

## SHIPPER AND CONSIGNEE

Shipper (Name & Address)

Consignee (Name & Address)

## ISSUING CARRIER'S AGENT

Issuing Carrier's Agent Name & City

Account Number

Agent's IATA Code

Airport of Departure (Addr. of First Carrier)

## ROUTING AND CARRIER

By First Carrier

Destination Airport

Requested Routing

## FLIGHT DETAILS

Flight/Date

Airport of Destination

## HANDLING INFORMATION

Handling Information

## ACCOUNTING INFORMATION

Accounting Information

## GOODS DESCRIPTION

No of Pieces	Gross Weight	Kg/Lbs	Commodity Item No.	Chargeable Weight	Rate/Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)

## OTHER CHARGES

Prepaid	Collect
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**Total Prepaid**

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**Total Collect**

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**Currency**

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**Signature of Shipper or Agent**

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**Signature of Issuing Carrier or Its Agent**

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**Date**