

729	SWK	47895396	47895396	729/47895396	
Shipper's Name and Address  CRASTA e CO. SRL CORSO GARIBALDI 367 80142 NAPOLI AS AGENTS		Shipper's Account Number 04731530632  NA - IT 081/5549980		<b>Not Negotiable</b>  <b>Air Waybill</b> TAMPA AIRLINE S.A. CARGO issued by TRANSPORTES AEREOS MERCANTILES PANAMERICANO MEDELLIN - COLOMBIA Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity	
Consignee's Name and Address  TSI GROUP, S.A. DE C.V. CALLE LLAMA DEL BOSQUE, URB. MADRE SELVA, EDIFICIO - LA LIBERTAD, - SV (503)2523-6407 AVANTE NIVEL 7, OFIC. 706,		Consignee's Account Number NIT:0501-120412-101-0		It is agreed that the goods described herein are accepted in apparent good order and condition (except as noted) for carriage SUBJECT TO THE CONDITIONS OF CONTRACT ON THE REVERSE HEREOF. ALL GOODS MAY BE CARRIED BY ANY OTHER MEANS INCLUDING ROAD OR ANY OTHER CARRIER UNLESS SPECIFIC CONTRARY INSTRUCTIONS ARE GIVE HEREON BY THE SHIPPER, AND SHIPPER AGREES THAT THE SHIPMENT MAY BE CARRIED VIA INTERMEDIATE STOPPING PLACES WHICH THE CARRIER DEEMS APPROPRIATE. THE SHIPPER'S ATTENTION IS DRAWN TO THE NOTICE CONCERNING CARRIER'S LIMITATION OF LIABILITY. Shipper may increase such limitation of liability by declaring a ghigher value for carriage and paying a supplemental charge if required.	
Issuing Carrier's Name and City CRASTA e CO. SRL CORSO GARIBALDI 367 80142 - NAPOLI (NA)		Accounting Information NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X			
Agent's IATA Code 38471310010		Account No.			
Airport of Departure (Addr. Of First Carrier) and Requested Routing SEGRATE		Codice Fiscale/Partita Iva del mittente		Imprenditore Non Imprenditore PF <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>	
To SAL	By First Carrier TAMPA CARGO	Routing and destination	to by to by	Currency EUR CHGS Code WT/VAL PPD COLL Other PPD COLL Declare Value for Carriage N.V.D. Declare Value for Customs N.C.V.	
Airport of Destination SAN SALVADOR		Flight/Date AV0301/03	For Carrier Use Only	Flight/Date	Amount of Insurance INSURANCE - If carrier offers insurance, and such insurance is requested in accordance with the conditions thereof, indicate amount to be insured in figures in box marked 'amount of insurance' ASSICURAZIONE - Qualora il Vettore offra una assicurazione e tale assicurazione sia richiesta in base alle condizioni indicate a tergo, indicare l'importo da assicurare in cifre nella casella 'importo assicurato'
Handling Information ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS NOTIFY: JOSE RODRIGUEZ (503)2523-6407 operacionestsb@transebastian.com.sv					
SCI					
No of Pieces RCP	Gross Weight	Kg lb	Rate Class Commodity Item No.	Chargeable Weight	Rate Charge Total
18	3467.80	K		3533.50	13533.305
18	3467.80			3533.50	13533.305
Prepaid Weight Collect			Other Charges		
13533.305			P.B.A. Fee		
Valuation Charge			Insurance Premium		
Tax			Special Handling		
Total Other Charges Due Agent			Shipper certifies that the particulars on the face hereof are correct and that insofar as any part of the consignment contains dangerous goods, such part is property described by name and is in proper condition for ccarriage by air according to the applicable Dangerous Goods Regulations.		
0.00			Il mittente dichiara che le indicazioni contenute sul fronte LTA sono esatte e che qualora una parte della spedizione contenga merci pericolose tale parte è debitamente indicata ed è nelle condizioni richieste ai fini del trasporto per via aerea secondo le norme sulle Merci Pericolose.		
Total Other Charges Due Carrier			CRASTA e CO. SRL EXA2400944		
36.00			Signature of Shipper or his Agent		
Total Prepaid			Total Collect		
13569.305					
Currency Conversion Rates			CC Charges in Dest. Currency		
			26/08/2024 SWK		
			Executed on (Date) at (Place)		
For Carriers use Only at Destination			Charge at Destination		
			Total collect Charges		

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ORIGINAL 3 (FOR SHIPPER)