GRA	MXP	0	00005724 /														GRA00005724										
Shipper'	s Name and Addre	ess	Shipper's Account Number									Not Negotiable															
										Air Waybill																	
CAVAGNA GROUP SPA DIVISIONE RECA											issued by																
25011 CALCINATO BS - IT																											
_	ATALE 11/13		Consignos	e Account	Number						Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity																
Consignee's Name and Address  Consignee's Account Number											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																
BROMIC P/L 10 PHINEY PLACE 2565 - INGLEBURN NSW - AU											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											Accounting Information																
											NON VALE FATTURA AI FINI IVA																
- ()											NOT CEE TRAFFIC STATUS DOG X																
Agent's IATA Code Account No.																											
38471310010																											
Airport of Deparature (Addr. Of First Carrier) and Requested Routing											Codice F	artita Iva	va del mittente				Imprenditore Non			renditore		=					
								by to by			Currency	CHGS	/VAL		Other		X edlare Value	for Carriage	De	clare Valu	SE e for C						
SYD		destination									EUR	Code PPC		COLL	T	X C		N.V.D.			N.C.V.						
Airport of Destination Flight/Date For Carrier Use C								FI	ight/Date	,	Amount of	I Insurance	-						uch insurance is re in box marked 'am			with the	conditions				
SYDNEY SQ377/19														ASSICURAZIONE - Qualora il Vettore offra una assicurazione e tale assicurazione sia richiesta in base al condizioni indicate a tergo, indicare l'importo da assicurare in cifre nelle casella 'Importo assicurato'									base alle				
ENCLOSED ONE ENVELOPE CONTAINING SHIP							G D	OCUN	/ENT	S												SCI X					
No of	Gross Weight   F	Kg	Rate Class Chargeable Rate										Nature and Quantity of Goods														
Pieces RCP		b	Commodity We Item No.				ght				Charge					(incl.	(incl. Dimensions or Volume)										
2 FREIGH	1	K									GREED			PRESSURE REGULATORS NOT STACKABLE													
												ı			Dims:1/120x80x1001/120x80x80												
2 473.00							473.00										1.728 CBM										
Prepaid Weight Collect AS AGREED									)		'	P.B.A. Fee															
Valutation Charge								Insurance Premium AS AGREED																			
Tax								ial Handli	ng																		
Total Other Charges Due Agent 0.00							cont	ains dar	ngerous	god	ods, such	part is p	roperty	desc	rib	ed by			ofar as any proper con								
Total Other Charges Due Carrier 0.00															e sul fronte LTA sono esatte e che qualora una parte della spedizione mente indicata ed è nelle condizioni richieste ai fini del trasporto per												
								/AGNA (							Shi	pper or	his Ag	ent									
	Total Prepaid	$\nearrow$	Total Collect									Signature of Shipper or his Agent															
Curre	ncy Conversion Rate	s	CC Charges in Dest. Currency /					9/2024	-	MX	:P																
341161	, comordion reac	25 Sharge								te) at	(Place	ace)															
For Carrie	rs use Only at Destin	nation	Charge	Total collect Cha				irges									/6										

