

074 SWK 65732026 65732026 074/65732026

Shipper's Name and Address LAMPO SA INT L FORWARDERS VIA LIVIO 16 6830 CHIASSO	Shipper's Account Number - CH	Not Negotiable Air Waybill KLM ROYAL DUTCH AIRLINES issued by SCHIPOL AIRPORT NETHERLANDS VIA CASSANESE 224 P 20090 MILANO
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Consignee's Name and Address JANTZEN INTERNATIONAL LTD 3205 N. WILKE RD. SUITE 100 60004 - ARLINGTON HEIGHTS, IL - US PH:847.640.5200 MAIL: IMPORT@JANTZENINTL.COM	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 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 higher value for carriage and paying a supplemental charge if required.
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Issuing Carrier's Name and City LAMPO SA VIA LIVIO 16 0000000 - CHIASSO (CH)	Accounting Information NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X SP-207428-65319500
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Agent's IATA Code 38471310010	Account No.
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Airport of Departure (Addr. Of First Carrier) and Requested Routing SEGRATE	Codice Fiscale/Partita Iva del mittente	Imprenditore <input type="checkbox"/> Non Imprenditore <input type="checkbox"/> PF <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>
To: ORD By First Carrier: KLM Routing and destination: to by to by	Currency: EUR CHGS Code: WT/VAL PPD COLL PPD COLL Other: X X	Declare Value for Carriage: N.V.D. Declare Value for Customs: N.C.V.

Airport of Destination CHICAGO	Flight/Date For Carrier Use Only KL8820/07+KL0611/11	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 offre una assicurazione e tale assicurazione sia richiesta in base alle condizioni indicate a tergo, indicare l'importo da assicurare in cifre nelle casella 'importo assicurato'
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Handling Information
NEW CHARTER SRL has reviewed all available documentation and has determined that none of the cargo being offered in this consignment or consolidation has originated in, transferred from, or transited through any point in Afghanistan, Lybia, Egypt, Somalia, Syria or Yemen.

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No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.	Chargeable Weight	Rate Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
2	170.00	K			170.00	2.71	460.7	CONSOLIDATED SHIPMENT AS PER ATTACHED CARGO MANIFEST GOODS NOT STACKABLE FREIGHT PREPAID DAP RICHMOND, IN
2	170.00				170.00		460.7	0.276 CBM

Prepaid	Weight	Collect	Other Charges	P.B.A. Fee
	460.7			
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 properly described by name and is in proper condition for carriage 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			LAMPO SA INT L FORWARDERS 2418/25	
24.20			Signature of Shipper or his Agent	
Total Prepaid		Total Collect		
484.9				
Currency Conversion Rates		CC Charges in Dest. Currency	06/11/2024 SWK Executed on (Date) at (Place)	
		Charge at Destination	Total collect Charges	