074	swĸ		66915251					66915251			074/66915251							
Shipper's Name and Address			Ship		Not Ne	gotiable												
04473160168								Air Wa	K	KLM ROYAL DUTCH AIRLINES								
RONDI IFF SRL VIA G. DONIZETTI 40 24040 CHIGNOLO D'ISOLA BG - IT								issued by			SCHIPOL AIRPORT NETHERLANDS VIA CASSANES 20090 MILANO							
Consignee's Name and Address Consignee's Account Number								+ -			his Air Waybill are originals and have the same validity						_	
PROLO 66278 OPERA Issuing RONDI VIA G.I	G CARGO MEX DNGACION LOS - SAN PEDRO G ATIONSAIR@RA Carrier's Name and I INT.FREIGHT F DONIZETTI, 40 - CHIGNOLO D			3	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. Accounting Information NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X									LL ER ER CH CE				
24040	OF HONOLO B				SP-207428-66297066													
384713 ²			ccount No.															
•	Deparature (Addr. Of	First C	Carrier) and Requeste	d Routing	l			Codice F	Fiscale/Par	ita Iva	del m	ittente		Imprenditore No	n Imp	, ⊨		
SEGRA To	By First Carrier		Routing and destination	to	by	to	by	Currency	CHGS Code	PPD		Other PPD Co	OLL	Dedlare Value for Carriage	l	SD Leclare Value for Custo	ms	
MTY	KLM							EUR		Х		Х		N.V.D.		.C.V.		
Airport of D MONTI Handling In	ERREY MX	Use Only	y Flight/Date Amount of Insurance Insurance and Substance Insurance is requested in accordance thereof, indicate amount to be insurance insurance and such insurance is requested in accordance thereof, indicate amount to be insured infigures in box marked amount of binarrance' ASSICURAZIONE - Qualors il Vettore offra una assicurazione e tale assicurazione sia rici condizioni indicate a tergo, indicare l'importo da assicurazione in offre nelle casella 'Importo assi								insurance' icurazione sia richiesta in base	alle						
	OSED ONE ENV								Tabal			I No.				SCI X		
No of Pieces RCP	Gross Weight K	_	Rate Class Commodity Item No.		Chargeabl Veight		Rate	Charge	Total		05	Nature and Quantity of Goods (incl. Dimensions or Volume) AS PER ATTACHED CARGO MANIFEST						
FREIGH	1					165.00		3.43		565	95	AS CON CAR Dims						
1	165.00					165.00				565	.95			0.:	216 C	ВМ		
Pre		Weight	C	ollect	Oth	er Charges	5						P.	B.A. Fee				
	Va	Inst	Insurance Premium											\dashv				
																	İ	
		Tax			Spe	cial Handli	ing											
Total Other Charges Due Agent 0.00 Total Other Charges Due Carrier						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. Il mittente dichiara che le indicazioni contenute sul fronte LTA sono esatte e che qualora una parte della spedizione												
23.90						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. RONDI IFF SRL Signature of Shipper or his Agent											_	
	Total Prepaid	\rightarrow	Total Colle	ect						Jigiiail		ppc/ UI	A	9"				
<u> </u>		9.85	CC Charges in De-	t Curso	27 / 27	111/2024		WK									_	
Curre	ncy Conversion Rates		CC Charges in Des	i. Curren	-	11/2024 cuted on		VVK vate) at		(Place	·)							
For Carriers use Only at Destination Charge at Destination						Total	collect Ch	narges								004505		



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