

ECR	SWK	24011071	202/31078084	ECR24011071	
Shipper's Name and Address		Shipper's Account Number		Not Negotiable	
SACMI IMOLA S.C. VIA SELICE PROVINCIALE, 17-A 40026 IMOLA BO - IT		00498321207		Air Waybill CRASTA e CO. SRL issued by CORSO GARIBALDI 367 NAPOLI	
Consignee's Name and Address		Consignee's Account Number		Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity	
RAVICORP INDUSTRIA, S.A. DE C.V. KM 27.5 CARRETERA A SONSONATE, LOURDES COLON 01512 - LA LIBERTAD, San Salvador - SV (503)23166400 ext818 Contacto: Juan Francisco Beloso				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		Accounting Information			
CRASTA e CO. SRL CORSO GARIBALDI 367 - NAPOLI ()		NOT CEE TRAFFIC- STATUS DOG X 38471310010SWKSAL075			
Agent's IATA Code		Account No.			
38471310010					
Airport of Departure (Addr. Of First Carrier) and Requested Routing		Codice Fiscale/Partita Iva del mittente		Imprenditore Non Imprenditore PF	
SEGRATE				<input checked="" type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>	
To	By First Carrier	Routing and destination	to	by	to
SAL	TACA AIRL. /AIR				
Currency	CHGS Code	WT/VAL	Other	Declare Value for Carriage	
EUR		PPD COLL	PPD COLL	N.V.D.	
Airport of Destination		Flight/Date	For Carrier Use Only	Flight/Date	Amount of Insurance
SAN SALVADOR		3J0000/15+AV0047/19+AV0130/20			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					SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Chargeable Weight	Rate
2	31.00	K	Commodity Item No.	84.00	7.17
FREIGHT PREPAID					
2	31.00			84.00	602.28
Prepaid		Weight	Collect	Other Charges	
		602.28		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		SACMI IMOLA S.C. EXA2401107			
0.00		Signature of Shipper or his Agent			
Total Prepaid		Total Collect			
602.28					
Currency Conversion Rates		CC Charges in Dest. Currency		02/10/2024 SWK	
				Executed on (Date) at (Place)	
For Carriers use Only at Destination		Charge at Destination		Total collect Charges	

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CASS ITALY

ORIGINAL 3 (FOR SHIPPER)