

ECR	MXP	24013941	075/66281364	ECR24013941			
Shipper's Name and Address ALL GLASS S.R.L. VIA CESARE SARTI, 20 43029 Traversetolo PR - IT +39 0521340810		Shipper's Account Number 02051840342		Not Negotiable Air Waybill CRASTA e CO. SRL issued by CORSO GARIBALDI 367 NAPOLI Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity			
Consignee's Name and Address VIDRIERA GUATEMALTECA, S.A AVENIDA PETAPA 48-01 ZONA 12 01012 - Guatemala City - GT 506 6132-7170 semurillo@grupovical.com		Consignee's Account Number NIT: 5674409		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 - NAPOLI ()							
Agent's IATA Code 38471310010		Account No.					
Airport of Departure (Addr. Of First Carrier) and Requested Routing MALPENSA MILAN AIRPORT, ITALY				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	By First Carrier	Routing and destination	to	by	to	by	
GUA	IBERIA LINEAS AEREAS DE ESPANA						
Currency		CHGS Code	WT/VAL	Other	PPD		COLL
EUR			X		X		
Declare Value for Carriage		Declare Value for Customs					
N.V.D.		N.C.V.					
Airport of Destination GUATEMALA CITY		Flight/Date IB0676/25+IB0221/26		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							
							SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.	Chargeable Weight	Rate Charge	Total
1	33.80	K			34.00	6.88	233.92
FREIGHT COLLECT freight collect							
1	33.80				34.00		233.92
Prepaid				Weight		Collect	
				233.92			
Valuation Charge							
Tax							
Total Other Charges Due Agent				0.00			
Total Other Charges Due Carrier				0.00			
Total Prepaid				233.92		Total Collect	
Currency Conversion Rates				CC Charges in Dest. Currency		20/11/2024 MXP	
						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)