

GRA	MXP	00000625	/	GRA00000625
Shipper's Name and Address CHROMAVIS SPA VIA EDWIN P. HUBBLE, 2 /4 26010 OFFANENGO CR - IT		Shipper's Account Number		Not Negotiable Air Waybill issued by Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity
Consignee's Name and Address NAPOLEON PERDIS COSMETICS P/L SUITE A 593 601 BOTANY RD - 2018 ROSEBERY NSW - AU		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 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 38471310010		Account No.		
Airport of Departure (Addr. Of First Carrier) and Requested Routing MALPENSA MILAN AIRPORT, ITALY				Codice Fiscale/Partita Iva del mittente Imprenditore <input checked="" type="checkbox"/> Non Imprenditore <input type="checkbox"/> PF <input type="checkbox"/> SD <input checked="" type="checkbox"/>
To	By First Carrier	Routing and destination	to	by
SYD				
Currency		CHGS Code	WT/VAL	Other
EUR			PPD COLL	PPD COLL
			X	X
Declare Value for Carriage		Declare Value for Customs		
N.V.D.		N.C.V.		
Airport of Destination SYDNEY		Flight/Date CX234/07+CX101/08		Amount of Insurance <small>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'</small> <small>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'</small>
Handling Information ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS				
				SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.
1	40.00	K		
FREIGHT COLLECT TOP LOAD - TOP LOAD - TOP LOAD				
1	40.00			
Chargeable Weight		Rate		Total
40.00		AS AGREED		
40.00				
Nature and Quantity of Goods (incl. Dimensions or Volume)				
COSMETICS HS CODE: 33041000 TOP LOAD Dims:1/120x100x20 0.24 CBM				
Prepaid		Weight		Collect
AS AGREED				
Valutation Charge		Other Charges		
		AS AGREED		
Tax		Insurance Premium		
		AS AGREED		
Total Other Charges Due Agent		Special Handling		
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 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.		
0.00		CHROMAVIS SPA		
Total Prepaid		Signature of Shipper or his Agent		
Total Collect				
Currency Conversion Rates		CC Charges in Dest. Currency		
		05/03/2025 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)