

047	SWK	31895721	31895721	047/31895721			
Shipper's Name and Address RONDI IFF SRL VIALE ITALIA 4 20045 LAINATE - IT		Shipper's Account Number 04473160168		Not Negotiable Air Waybill TAP AIR PORTUGAL APARTADO 5194 issued by LISBOA CODEX PORTUGAL VIA G.B. MARTINI, 13 00198 ROMA			
Consignee's Name and Address CARGOFAST LOGISTICS DO BRASIL LTDA AVENIDA SENADOR FEIJO,686-SALA 1817 E 1818 - SANTOS 11015-504 PH (11)98283-5567* - BR RONALDO.CAMARGO@CARGOFAST.COM.BR		Consignee's Account Number 10.268.203/0001-17		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 gghier value for carriage and paying a supplemental charge if required.			
Issuing Carrier's Name and City RONDI INT.FREIGHT FORW. SRL VIA G.DONIZETTI, 40 24040 - CHIGNOLO D'ISOLA (BG)							
Agent's IATA Code 38471310010		Account No.					
Airport of Departure (Addr. Of First Carrier) and Requested Routing SEGRATE			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 CNF	By First Carrier TAP PORTUGAL	Routing and destination	to by to by	Currency CHGS WT/VAL Other Code PPD COLL PPD COLL EUR X X N.V.D. N.C.V.			
Airport of Destination CONFINS-BELO OR		Flight/Date TP8020/01+TP0103/04	For Carrier Use Only Flight/Date	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' 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 *CNPJ:10.268.203/0001-17				SCI X			
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)
1	60.00	K		60.00	8.91	534.6	CONSOLIDATED SHIPMENT AS PER ATTACHED CARGO MANIFEST HS CODE 84549000 DIE-CASTING SPARE PARTS NCM 8483 Dims:1/354x15x27 <div style="text-align: right;">0.143 CBM</div>
1	60.00			60.00		534.6	
Prepaid		Weight	Collect	Other Charges			P.B.A. Fee
		534.6					
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. 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							
Total Other Charges Due Carrier				RONDI IFF SRL <div style="text-align: right;">XX</div> Signature of Shipper or his Agent			
22.69							
Total Prepaid		Total Collect					
557.29							
Currency Conversion Rates		CC Charges in Dest. Currency		29/07/2025 SWK Executed on (Date) at (Place)			
For Carriers use Only at Destination		Charge at Destination		Total collect Charges			



CASS ITALY

ORIGINAL 3 (FOR SHIPPER)

047/31895721