

ECR	SWK	25008731	074/70025546	ECR25008731				
Shipper's Name and Address STANADYNE SPA VIA MATTEOTTI 158 25014 CASTENEDOLO BS - IT +39 030 213 00 70 CBERTUZZI@STANADYNE.COM		Shipper's Account Number 00291090173		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 MOTORES JOHN DEERE S.A. DE C.V CARR. A MIELERAS K.M 6.5 S/N, FERROPUERTO 27400 - TORREON COAHUILA - MX 52 8717295000 CASTAANALaura@JOHNDEERE.COM		Consignee's Account Number MJD960223MV9		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 ghighter value for carriage and paying a supplemental charge if required.				
Issuing Carrier's Name and City CRASTA E CO. SRL CORSO GARIBALDI 367 - NAPOLI ()			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 SEGRATE			Codice Fiscale/Partita Iva del mittente					
To By First Carrier Routing and destination to by to by			Currency CHGS Code WT/VAL Other Declare Value for Carriage Declare Value for Customs					
KLM			EUR PPD COLL PPD COLL N.V.D. N.C.V.					
Airport of Destination		Flight/Date For Carrier Use Only Flight/Date		Amount of Insurance				
		KL8820/03+KL0685/05		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								
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Commodity Item No.	Chargeable Weight	Rate	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
1	240.00	K			240.00	AS AGREED		GENERAL CARGO, INJECTOR HS CODE: 8409990090 1 PLT; 240 KG GOODS NOT STACKABLE Dims:1/100x60x45
1	240.00				240.00			0.27 CBM
Prepaid		Weight		Collect		Other Charges		P.B.A. Fee
				AS AGREED		AS AGREED		
		Valutation Charge				Insurance Premium		
						AS AGREED		
		Tax				Special Handling		
		Total Other Charges Due Agent		0.00		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.		STANADYNE SPA <div style="text-align: right;">EXA2500873</div>
		Total Other Charges Due Carrier		0.00				
		Total Prepaid		Total Collect		Signature of Shipper or his Agent		
Currency Conversion Rates		CC Charges in Dest. Currency		28/05/2025 SWK				
				Executed on (Date) at (Place)				
For Carriers use Only at Destination		Charge at Destination		Total collect Charges				

ECR/25008731



CASS ITALY

ORIGINAL 3 (FOR SHIPPER)