

01	MXP	00008575	047/32465392		01 00008575									
Shipper's Name and Address GRAFIKONTROL SPA VIA LUDOVICO D'ARAGONA 7 20132 MILANO - IT 02-2100951 INV. FA25-0434 DTD 08.10.25			Shipper's Account Number CNPJ: 62.461.140/0019-43		Not Negotiable Air Waybill AIRSEALAND FRANCO BONARETTI SRL issued by VIA CALABRIA 3 MILANO									
					Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity									
Consignee's Name and Address LUA NOVA IND.E COM.PROD.ALIMENTICIOS LTDA RUA AGRIMENSOR SUGAYA, 1600 - 08260-030 SAO PAULO - BR			Consignee's Account Number CNPJ: 62.461.140/0019-43		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 AIRSEALAND FRANCO BONARETTI SRL VIA CALABRIA 3 - MILANO ()					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 Non Imprenditore PF ☐ ☒ ☐ SD ☒				
To	By First Carrier	Routing and destination		to	by	to	by	Currency	CHGS Code	WT/VAL PPD COLL	Other PPD COLL	Declare Value for Carriage	Declare Value for Customs	
GRU	TAP PORTUGAL							EUR				N.V.D.	N.C.V.	
Airport of Destination GUARULHOS SAO PAULO			Flight/Date For Carrier Use Only Flight/Date TP827/11+TP089/12		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 MARKS: ADDRESS 00008575 - 1 BOX ENCLOSURES: COMM.INVOICE - P.LIST														
													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	0.24	M			0.50	245.00	245.00	AMPLIFIER GROUP HS CODE: 844391						
1	0.24				0.50		245.00							
Prepaid Weight Collect 245.00			Other Charges FOB CHARGES EUR 314					P.B.A. Fee						
Valutation Charge			Insurance Premium											
Tax			Special Handling											
Total Other Charges Due Agent			314.00					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.						
Total Other Charges Due Carrier			0.00											
			AIRSEALAND FRANCO BONARETTI AS AGENT OF THE CARRIER											
Total Prepaid			Total Collect 559					Signature of Shipper or his Agent						
Currency Conversion Rates			CC Charges in Dest. Currency											
			10/10/2025 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)