



Nº Package

**1 of 1**

House:KAYA3094

FROM: US

TO: BR

**Shipper**

NAME: USA KAYA CORPORATION  
RUC/DNI/ID:  
ATT. FROM:  
ADDRESS: 777 NW 72ND AVENUE 2099 33126 MIAMI  
ADD INFO: 777 NW 72ND AVENUE 2099 33126 MIAMI  
NEIGHBORHOOD DORAL  
CITY/ST: MIAMI/ FLORIDA  
ZIP CODE: 00033126  
PHONE: 13052169376  
EMAIL: usakaya@medkaya.com.br

**Consignee**

NAME: NEYDE SIMONASSE BUANI  
RUC/DNI/ID: 34171796881  
ATT. TO:  
ADDRESS: AVENIDA JORNALISTA TIM LOPES  
ADD INFO: NUMERO 255 COMPLEMENTO BLOCO 12 APT0 206  
NEIGHBORHOOD BARRA DA TIJUCA  
CITY/ST: RIO DE JANEIRO/ RJ  
ZIP CODE: 22640105  
PHONE: 21993033415  
EMAIL: DIEGO@MEDKAYA.COM.BR

**NON-NEGOTIABLE CONSIGNMENT NOTE SUBJECT TO STANDARD TRADING CONDITIONS SHOWN ON THEREVERSE OF THE SHIPPERS RECEIPT**

**DESCRIPTION**

PROFORMA INVOICE REQUIRED FOR ALL NON-DOCS

| DESCRIPTION | OLEO 600MG THC FULLSPECTRUM IN 30ML | Valor (U\$S): | Peso Total (Kg): |
|-------------|-------------------------------------|---------------|------------------|
|             |                                     | 96            | 0.19             |

Pieces

**DELIVERED DUTY PAID**

| Item Nº | Quantity | Length | Width | Height | Weight | Vol weight |
|---------|----------|--------|-------|--------|--------|------------|
| 1       | 1        | 15.50  | 10.50 | 4.00   | 0.19   | 21.70      |

---