



M2147084COL

Nº Package

1 of 1

House: M2147084COL

FROM:BRASIL

TO : BRASIL

Shipper

NAME: MEDKAYA PRODUTOS E
SERVIÇOS FARMACÊUTICOS LTDA
RUC/DNI/ID: 28604566000141
ATT. FROM: .
ADDRESS: Av. das Américas, 3959 - Loja 229
ADD INFO:

CITY/ST: 8105, RJ
ZIP CODE: 22631-003
PHONE: 5521997824200

Consignee

NAME: Josefa Irene Hrubá
RUC/DNI/ID: 01619839954
ATT. TO: .
ADDRESS: Avenida João Pessoa - Leste, 622
ADD INFO: Loja Quero Quero
Pedido aos cuidados de Peterson
Hrubá CPF 130.930.289.81

CITY/ST: Mallet - Parana-PR
ZIP CODE: 84570350
PHONE: 5541996931792

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

DESCRIPTION

PROFORMA INVOICE REQUIRED FOR ALL NON-DOCS

DESCRIPTION Produto Manipulado Farmacêutico

Valor(US\$):

57.27

Peso Total(Kg):

0.30

Pieces

DELIVERED DUTY UNPAID

Item Nº	Len	Width	Height	Weight	Vol weight
1	2.000	2.000	2.000	0.300	0.001

ATTENTION -----

RECEIVED BY -----

DATE -----

SIGNATURE -----