



M2153618COL

Nº Package

1 of 1

House: M2153618COL

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: Maria Tereza Vicente Alves
RUC/DNI/ID: 17434052430
ATT. TO: .
ADDRESS: RUA SABINO VIANA, 144
ADD INFO: 1 Andar
CITY/ST: PATOS - PARAIBA-PB
ZIP CODE: 58707020
PHONE: 5583993188553

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

PROFORMA INVOICE REQUIRED FOR ALL NON-DOCS

DESCRIPTION

DESCRIPTION Produto Manipulado Farmacêutico

Valor(US\$):
57.67Peso 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