

703	MXP	12994995	12994995	703/12994995	
Shipper's Name and Address		Shipper's Account Number		Not Negotiable Air Waybill NEOS SPA issued by VIA DELLA CHIESA 68 21019 - SOMMA LOMBARDO (VA) - ITALY	
MAC SHIPPING ITALY SRL VIA DEL GREGGE, 100 21012 LONATE POZZOLO info@macshipping.com VA - IT 0331/070796					
Consignee's Name and Address		Consignee's Account Number		Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity	
M.A.C. SHIPPING CORP. 182-09 149TH ROAD 11413 - JAMAICA PH7185250003 NY - US donald@macshipping.com				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				Accounting Information NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X	
MAC SHIPPING ITALY SRL VIA DEL GREGGE, 100 21012 - LONATE POZZOLO (VA)					
Agent's IATA Code		Account No.			
38471310010					
Airport of Departure (Addr. Of First Carrier) and Requested Routing				Codice Fiscale/Partita Iva del mittente	
MALPENSA MILAN AIRPORT, ITALY				Imprenditore <input checked="" type="checkbox"/> Non Imprenditore <input type="checkbox"/> PF <input type="checkbox"/> SD <input checked="" type="checkbox"/>	
To	By First Carrier	Routing and destination	to	by	to
JFK	NEOS AIR				
Currency	CHGS Code	WT/VAL	Other	Declare Value for Carriage	
EUR		PPD COLL	PPD COLL	N.V.D.	
				N.C.V.	
Airport of Destination		Flight/Date	For Carrier Use Only		Flight/Date
NEW YORK		NO0787/20			
Amount of Insurance <small>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'</small> <small>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'</small>					
Handling Information NEW CHARTER SRL has reviewed all available documentation and has determined that none of the cargo being offered in this consignment or consolidation has originated in, transferred from, or transited through any point in Egypt, Somalia, Syria or Yemen.					
					SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Chargeable Weight	Rate
298	1820.00	K	Commodity Item No.	2293.50	Charge 1.85
298	1820.00			2293.50	
					4242.975
Nature and Quantity of Goods (incl. Dimensions or Volume)					
CONSOLIDATED SHIPMENT AS PER ATTACHED CARGO MANIFEST FREIGHT PREPAID CUSTOMER CODE 1374					
					13.76 CBM
Prepaid		Weight		Collect	
		4242.975			
Valuation Charge		Insurance Premium			
Tax		Special Handling			
Total Other Charges Due Agent		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.			
0.00		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		MAC SHIPPING ITALY SRL			
124.06		Signature of Shipper or his Agent			
Total Prepaid		Total Collect			
4367.035					
Currency Conversion Rates		CC Charges in Dest. Currency		16/01/2025 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)