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Shipper's Name and Address		Shipper's Account Number	Not Negotiable		
M.A.C. SHIPPING ITALY SRL VIA DEL GREGGE 100 21019 LONATE POZZOLO VA - IT 0331070796 INFO@MACSHIPPING.COM			Air Waybill AMERICAN AIRLINES INC issued by PO BOX 61616 DALLAS INTL AIRPORT 75261 DALLAS- TX- USA		
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 (NY) UNITED STATES OF AMERICA NY - US 7185250000 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 a higher value for carriage and paying a supplemental charge if required.		
Issuing Carrier's Name and City MAC SHIPPING ITALY SRL VIA DEL GREGGE, 100 21012 - LONATE POZZOLO (VA)		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 LINATE		Codice Fiscale/Partita Iva del mittente		Imprenditore Non Imprenditore PF <input type="checkbox"/> <input checked="" type="checkbox"/> SD <input checked="" type="checkbox"/>	
To	By First Carrier	Routing and destination	to	by	to
JFK	AMERICAN AIRLINES INC.				
Currency	CHGS Code	WT/VAL	Other	Declare Value for Carriage	
EUR		PPD COLL	PPD COLL	N.V.D.	
Airport of Destination NEW YORK		Flight/Date	For Carrier Use Only	Flight/Date	Amount of Insurance
		AA7835/18+AA0235/21			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 ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS					
					SCI X
No of Pieces RCP	Gross Weight	Kg lb	Rate Class	Chargeable Weight	Rate
41	568.00	K	Commodity Item No.	771.00	1.85
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. THIS STATEMENT WILL HAVE TO BE KEPT ON FILE FOR 90 DAYS AT THE ACCEPTING LOCATION					
41	568.00			771.00	1426.35
Prepaid		Weight	Collect	Other Charges	
		1426.35		P.B.A. Fee	
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		M.A.C. SHIPPING ITALY SRL			
17.06		Signature of Shipper or his Agent			
Total Prepaid		Total Collect			
1443.41					
Currency Conversion Rates		CC Charges in Dest. Currency		15/04/2025 LIN	
				Executed on (Date) at (Place)	
For Carriers use Only at Destination		Charge at Destination		Total collect Charges	



CASS ITALY

ORIGINAL 3 (FOR SHIPPER)

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