

EMA	LIN	00000865	001/11298862	EMA00000865			
Shipper's Name and Address		Shipper's Account Number		Not Negotiable			
OLIP ITALIA SPA VIA CONFINE 13 37017 COLA' DI LAZISE VR - IT T:0456463111 NADIA.COATO@OLIP.IT				Air Waybill issued by MAC SHIPPING ITALY SRL VIA DEL GREGGE, 100 LONATE POZZOLO			
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			
MIZ MOOZ INC. 35 WASHINGTON STR. UNIT 1 BROOKLYN 11201 - NEW YORK - US T:2129660042 RON@MIZ-MOOZ.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			
MAC SHIPPING ITALY SRL VIA DEL GREGGE, 100 - LONATE POZZOLO ()				NON VALE FATTURA AI FINI IVA NOT CEE TRAFFIC STATUS DOG X			
Agent's IATA Code		Account No.					
38471310010							
Airport of Departure (Addr. Of First Carrier) and Requested Routing				Codice Fiscale/Partita Iva del mittente		Imprenditore Non Imprenditore PF	
LINATE						<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> SD <input checked="" type="checkbox"/>	
To	By First Carrier	Routing and destination	to	by	to	by	
JFK	AMERICAN AIRLINES INC.						
Currency	CHGS Code	WT/VAL PPD COLL	Other PPD COLL	Declare Value for Carriage		Declare Value for Customs	
EUR		X	X	N.V.D.		N.C.V.	
Airport of Destination		Flight/Date	For Carrier Use Only	Flight/Date	Amount of Insurance		
NEW YORK		AA8021/20+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 offre una assicurazione e tale assicurazione sia richiesta in base alle condizioni indicate a tergo, indicare l'importo da assicurare in cifre nelle 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	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
58	812.00	K	Commodity Item No.	1004.50	AS AGREED		FOOTWEAR HS CODE 64039998 - 64039911 DIMS: 1/54x44x36 - 5/67x44x36 - 27/80x44x36 - 8/66x30x34 - 1/54x38x33 - 1/44x38x33 - 6/81x36x37 - 1/44x27x36 - 3/68x34x34 - 1/34x30x34 - 1/35x34x34 - 1/54x36x37 - 2/80x44x36
58	812.00			1004.50			6.026 CBM
Prepaid		Weight		Collect		Other Charges	
				AS AGREED		AS AGREED	
Valuation Charge				Insurance Premium			
				AS AGREED			
Tax				Special Handling			
Total Other Charges Due Agent				0.00			
Total Other Charges Due Carrier				0.00			
				OLIP ITALIA SPA			
Total Prepaid				Signature of Shipper or his Agent			
Total Collect							
Currency Conversion Rates		CC Charges in Dest. Currency		14/05/2025 LIN			
				Executed on (Date) at (Place)			
For Carriers use Only at Destination		Charge at Destination		Total collect Charges			

EMA/00000865



CASS ITALY

ORIGINAL 3 (FOR SHIPPER)