eMA	MXP	00000884	001/14508771	eMA00000884

Shipper's Name and Address

OLIP ITALIA SPA
VIA CONFINE 13
37017 COLA' DI LAZISE VR - IT 0456463111
NADIA.COATO@OLIP.IT

Shipper's Account Number

Not Negotiable

Air Waybill issued by: MAC SHIPPING ITALY SRL
VIA DEL GREGGE, 100
LONATE POZZOLO

Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity

Consignee's Name and Address

MIZ MOOZ INC.
35 WASHINGTON STR. UNIT 1 BROOKLYN
11201 - NEW YORK NY NY - US 2129660042
RON@MIZ-MOOZ.COM

Consignee's Account Number

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

MAC SHIPPING ITALY SRL
VIA DEL GREGGE, 100
- LONATE POZZOLO ()

Accounting Information

Agent's IATA Code	Account No.
38471310010	

Airport of Departure (Addr. Of First Carrier) and Requested Routing

MALPENSA MILAN AIRPORT,ITALY IT

Codice Fiscale/Partita Iva del mittente

Imprenditore: X | Non Imprenditore: | PF: | SD: X

To	By First Carrier	Routing and destination	to	by	to	by	Currency	CHGS Code	WT/VAL PPD	WT/VAL COLL	Other PPD	Other COLL	Declare Value for Carriage	Declare Value for Customs
	AMERICAN AIRLINES INC.						EUR			X		X	N.V.D.	N.C.V.

Airport of Destination	Flight/Date For Carrier Use Only	Flight/Date	Amount of Insurance	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 nelle casella 'Importo assicurato'
	AA199/26JUL			

Handling Information

ENCLOSED ONE ENVELOPE CONTAINING SHIPPING DOCUMENTS

SCI

No of Pieces RCP	Gross Weight	Kg lb	Rate Class / Commodity Item No.	Chargeable Weight	Rate / Charge	Total	Nature and Quantity of Goods (incl. Dimensions or Volume)
28	267.00	K		456.50	AS AGREED		WOMEN'S SHOE HS CODE 64039998 WOMEN'S SANDALS HS CODE 64039911
28	267.00			456.50			

Prepaid	Weight	Collect	Other Charges	P.B.A. Fee
		AS AGREED	AS AGREED	

Valutation Charge	Insurance Premium
	AS AGREED
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. 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.
0.00	
Total Other Charges Due Carrier	
0.00	
	OLIP ITALIA SPA
	Signature of Shipper or his Agent
Total Prepaid / **Total Collect**	
Currency Conversion Rates / **CC Charges in Dest. Currency**	21/07/2025 MXP
	Executed on (Date) at (Place)
For Carriers use Only at Destination / **Charge at Destination**	**Total collect Charges**

eMA/00000884

CASS ITALY ORIGINAL 3 (FOR SHIPPER)