

eMA	MXP	00000892	001/11299676	eMA00000892																
Shipper's Name and Address OLIP ITALIA SPA VIA CONFINE 13 37017 COLA' DI LAZISE VR - IT +39 045 6463111 NADIA.COATO@OLIP.IT		Shipper's Account Number		Not Negotiable Air Waybill MAC SHIPPING ITALY SRL issued by 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 ghighter value for carriage and paying a supplemental charge if required.														
Accounting Information																				
Agent's IATA Code 38471310010		Account No.																		
Airport of Departure (Addr. Of First Carrier) and Requested Routing MALPENSA MILAN AIRPORT,ITALY IT																				
To		By First Carrier		Routing and destination		to		by		to		by		Currency	CHGS Code	WT/VAL PPD COLL	Other PPD COLL	Declare Value for Carriage	Declare Value for Customs	
		AMERICAN AIRLINES INC.												EUR					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"										
AA199/31AUG																				
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		Total	Nature and Quantity of Goods (incl. Dimensions or Volume)										
				Charge																
27	467.00	K				602.00	AS AGREED			LADIES LEATHER BOOTS										
27	467.00					602.00														
Prepaid			Weight			Collect			Other Charges											
						AS AGREED			AS AGREED											
			Valutation Charge						Insurance Premium											
									AS AGREED											
			Tax						Special Handling											
			Total Other Charges Due Agent			0.00			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.											
			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			28/08/2025 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)