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|------------------------------------------------------------------------------|--|---------------------------------------|--|-------------------------|-----------------------|------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------|--|------|--|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--|-----------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----|--|------|--|-------|--|-----|--|------|--|-----------------------------|--|--|--|----------------------------|--|--|--|
| 465                                                                          |  | HKT                                   |  | 13114990                |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  | 465-13114990 |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Shipper's Name and Address                                                   |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  | Shipper's account Number   |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  | Not Negotiable<br><b>Air Waybill</b><br>Issued by <b>Cathay Pacific Airways</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| undefined<br>undefined undefined undefined (undefined)<br>undefinedundefined |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| undefined<br>undefined undefined undefined (undefined)<br>undefinedundefined |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  | 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 GIVEN 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 higher value for carriage and paying a supplemental charge if required. |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Issuing Carrier's Agent Name and City                                        |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  | Accounting information     |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Agent's IATA Code                                                            |  |                                       |  |                         | Account No.           |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Airport of Departure (Addr of first Carrier) and requested Routing           |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  | Reference Number           |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  | Optional Shipping Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Hong Kong International Airport                                              |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| to                                                                           |  | By first Carrier                      |  | Routing and Destination |                       |                              |  | to                                                                                                                                                                                                                                                                                              |  | by                         |  | to   |  | by           |                                                                                                                                                                                              | Currency |  | CHGS Code                                                 |  | WT/VAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | PPD |  | COLL |  | Other |  | PPD |  | COLL |  | Declared Value for Carriage |  |  |  | Declared Value for Customs |  |  |  |
| HKT                                                                          |  | CX771/13                              |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Airport of Destination                                                       |  |                                       |  |                         | Requested Flight/Date |                              |  |                                                                                                                                                                                                                                                                                                 |  | Amount of Insurance        |  |      |  |              | INSURANCE - If carrier offers insurance, such insurance is requested in accordance with the conditions thereof, indicate amount to be insured in figures in box marked "Amount of Insurance" |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Phuket International Airport                                                 |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Handling Information                                                         |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  | 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) |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| 900                                                                          |  | 3,092.00                              |  | K                       |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  | BAGGAGE TEXTILE<br><br>DIMS:<br>VOLUME: 14.08 MC          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
| Prepaid                                                                      |  | Weight Charge                         |  |                         |                       | Collect                      |  | Other Charges                                                                                                                                                                                                                                                                                   |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | Valuation Charge                      |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | Tax                                   |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | 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 properly described by name and is in proper condition for carriage by air according to the applicable Dangerous Goods Regulations. |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | Total other Charges Due Carrier       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  |                                       |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | Total prepaid                         |  |                         |                       | Total collect                |  | Signature of Shipper or his Agent                                                                                                                                                                                                                                                               |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | Currency Conversion Rates             |  |                         |                       | cc charges in Dest. Currency |  |                                                                                                                                                                                                                                                                                                 |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  |                                       |  |                         |                       |                              |  | Executed on (Date) at (Place) Signature of Issuing Carrier or its Agent                                                                                                                                                                                                                         |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | Charges at Destination                |  |                         |                       |                              |  | Total collect Charges                                                                                                                                                                                                                                                                           |  |                            |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |
|                                                                              |  | For Carrier's Use only at Destination |  |                         |                       |                              |  |                                                                                                                                                                                                                                                                                                 |  | 465-13114990               |  |      |  |              |                                                                                                                                                                                              |          |  |                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |     |  |      |  |       |  |     |  |      |  |                             |  |  |  |                            |  |  |  |