900	HKT											900	-88888810				
Shipper's Name and Address Shipper's account Number																	
บริษัทไทย ไลอ้อน เมนทารี จำกัด 89/46 Bangkok 10160 (TH) TEL : 0972396757									Air \	Wa	aybil		irAs	ia			
Consignee's Name and Address Consignee's account							t Number								s Air Waybill are originals an		
ConsigneeName10 9991/201 Supanburi 24020 (TH) TEL : 0811095520									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 suppiemental charge if required.								
Issuing Ca	ırrier's Agent Nar			Accounting	g info	ormation											
Agent's IA	TA Code				_												
	FD524-ABC-0	001															
Airport of Departure (Addr of first Carrier) and requested Routing								Reference N							Optional Shipping In	formation	
		e Changi Airport															
to E	By first Carrier	Routing	and Des	tination	to	by	to	by	Currency			T/VAL COLL	Othe PPD	COL	Declared Value for Car	riage	Declared Value for Customs
HKT F	D524/01	-4:		Requi	ested Flig	ht/Date	\perp		A			<u> </u>	INISI	IPΔ	NCE - If carrier offers insura	nce suc	ch incurance is
Airport of Destination Requeste Phuket International Airport									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"								thereof, indicate amount
Handling I		•		<u> </u>									10 0	2 1110	area in figures in box marks	4 711104	int of indurance
																	SCI
No. of	1	1	11	Rate Class			1		1					_	<u> </u>		
No. of Pieces RCP	Gross kg Weight lb			Commodity Item No.				ble t	Rate			Charg	е	Total		Nature and Quantity of Goods (incl. Dimensions or Volume)	
150	210.00	1	<	0007				0.00	0			0.00			0.00	00	APPLE DIMS: 20x30x40CM/10 60x70x80CM/50
Pro	paid	Weight	Charge		Collect		Other Char	arges									100x110x120CM/90 VOLUME: 135.84 MC
		n Charge	,														
	\										0						
			·														
Total other Charges Due Agent Shipper Certifies that the particulars on the face hereof are correct and that insofar as any part of the														t of the			
consignment contains dangerous goods, such part is properly described by name and is carriage by air according to the applicable Dangerous Goods Regulations.														is in pr	oper condition for		
	Tot	rges Due	Carrier	_/													
													Qianat.		Shipper or hip Accest		
\vdash	Total prepaid		\vdash	Total collect		\rightarrow							oignatu	ie Of	Shipper or his Agent		
	0.00	_] `	_		,											
Cur	rrency Conversion Rat	_/	Executed on (Date) at (Place) Signature of Issuing Carrier or its Agent														
For Carrier's Use only at Destination Charges at Destination								Total collect		/	1,530	- /			900-88		-