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| Shipper's Name and Address<br><b>JIANGSU YUCHANG OPTICAL GLASSES CO.,LTD.<br/>ADD:DANGUI ROAD,DEVELOPMENT AREA,DANYANG<br/>JIANGSU,P.R. OF CHINA<br/>TEL:0086-511-86230232 FAX:0086-511-86565876</b>   |                          | Shipper's Account Number                                                                    |                   | Not Negotiable<br><b>Air Waybill</b><br>Issued by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |
| Consignee's Name and Address<br><b>GLASSIC EYEWEAR PRIVATE LIMITED<br/>ADD:NO 2151, 3RD FLOOR, 17TH MAIN ROAD, OPP KEB<br/>OFFICE,<br/>INDIRA NAGAR, BANGALORE 560008<br/>GST NO: 29AAF CG9488C1Z5</b> |                          | Consignee's Account Number                                                                  |                   | Copies 1, 2 and 3 of this Air Waybill are originals and have the same validity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Issuing Carrier's Agent Name and City<br><b>SAME AS CONSIGNEE</b>                                                                                                                                      |                          | Accounting Information/Also Notify<br><b>FREIGHT COLLECT</b>                                |                   | 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. |                    |
| Agent's IATA Code                                                                                                                                                                                      |                          | Account No.                                                                                 |                   | Reference Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |
| Airport of Departure (Addr. of first Carrier) and requested Routing<br><b>SHANGHAI</b>                                                                                                                 |                          | Optional Shipping Information                                                               |                   | Declared Value for Carriage<br><b>NVD</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                    |
| To                                                                                                                                                                                                     | By First Carrier         | Routing and Destination                                                                     | to                | by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | to                 |
| <b>BLR</b>                                                                                                                                                                                             |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Currency<br><b>USD</b>                                                                                                                                                                                 |                          | Declared Value for Customs<br><b>NCV</b>                                                    |                   | Amount of Insurance<br><b>2018-1-4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                    |
| AIRPORT OF DESTINATION<br><b>BLR</b>                                                                                                                                                                   |                          | Rebooked Flight/Date<br><b>TG665</b>                                                        |                   | 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'.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |
| HANDLING INFORMATION                                                                                                                                                                                   |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| SCI                                                                                                                                                                                                    |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| (For USA only) These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to USA law prohibited.      |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| No. of Pieces<br>RCP                                                                                                                                                                                   | Gross Weight<br>kg<br>lb | Rate Class<br>Commodity Item No.                                                            | Chargeable Weight | Rate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Total              |
| <b>4</b>                                                                                                                                                                                               | <b>47.0</b>              | <b>K C</b>                                                                                  | <b>50.0</b>       | <b>Charge</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>AS ARRANGED</b> |
| MARKS: N/M                                                                                                                                                                                             |                          | NATURE AND QUANTITY OF GOODS (incl. Dimensions or Volume)<br><b>ACETATE EYEGLASS FRAMES</b> |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
|                                                                                                                                                                                                        |                          | <b>VOL: 0.3CBM</b>                                                                          |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Prepaid                                                                                                                                                                                                | Weight Charge            | Collect                                                                                     | Other Charges     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
|                                                                                                                                                                                                        |                          | <b>AS ARRANGED</b>                                                                          |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Valuation Charge                                                                                                                                                                                       |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Tax                                                                                                                                                                                                    |                          | <b>AS ARRANGED</b>                                                                          |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Total other Charges Due Agent                                                                                                                                                                          |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Total other Charges Due Carrier                                                                                                                                                                        |                          |                                                                                             |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Total prepaid                                                                                                                                                                                          |                          | <b>AS ARRANGED</b>                                                                          |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Currency Conversion Rates                                                                                                                                                                              |                          | cc charges in Dest. Currency                                                                |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| Charges at Destination                                                                                                                                                                                 |                          | Total collect Charges                                                                       |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
| For Carriers Use only at Destination                                                                                                                                                                   |                          | Signature of Issuing Carrier or its Agent.                                                  |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
|                                                                                                                                                                                                        |                          | 2018-1-3 SHANGHAI                                                                           |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
|                                                                                                                                                                                                        |                          | Executed on (Date) at (Place)                                                               |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |
|                                                                                                                                                                                                        |                          | Signature of Shipper or his Agent                                                           |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |