

Freight Instructions / Shipping Manual

(Deadline: August 19, 2009)



Form 19

**Please return this Form to : Mrs. Nuanchan Kumsaeng
Trans-Link Express (Bangkok) Co., Ltd.**

20th Floor, Panjathani Tower, 127/25 Nonsee Road, Chongnonsee, Yannawa, Bangkok 10120, Thailand
Tel.: (66) 2681 2000 Fax: (66) 2681 2910 E-mail: Nkumsaeng@agilitylogistics.com

This form must be completed and returned by every exhibitor. If service is not required, please endorse 'NOT APPLICABLE' and return / fax to the address above.

We appointed Trans-Link Express (Bangkok) Co., Ltd. the Official Forwarding Agent and On-Site Installation Contractor that we shall be shipping the following for the event, and we instruct Trans-Link to customs clear and deliver the goods to our stand:

No. of pieces	Description of contents	Dimensions (metres)	Weight (kg)

We also note and understand the following:

1. DEADLINE FOR SHIPMENT

- Receipt of Motion Picture Film or VDO Tape : **2 September 2009**
- Receipt of documents for sea freight consignments : **19 August 2009**
- Receipt of documents for airfreight consignments : **26 August 2009**
- Arrival of seafreight consignments : **26 August 2009**
- Arrival of airfreight consignments : **2 September 2009**

2. CONSIGNMENT INSTRUCTIONS

Trans-Link Express (Bangkok) Co., Ltd.
20th Floor, Panjathani Tower, 127/25 Nonsee Road
Chongnonsee, Yannawa, Bangkok 10120, Thailand
Tel : +66 (0) 2681 2000 Fax : +66 (0) 2681 2910
Attn: Mrs Nuanchan Kumsaeng
Email : Nkumsaeng@agilitylogistics.com

3. INSURANCE

It is the responsibility of each exhibitor to arrange Marine (Transport) Insurance covering transport to the exhibition, during the exhibition, and the return of the exhibits to domicile, including the period the exhibits are handled by Trans-Link, and also ensure that Transport Insurance is arranged for exhibits sold locally.

We also inform Trans-Link Express (Bangkok) Co., Ltd. that we will be using the services of the company below to freight our exhibits from _____(country). Name of Freight Forwarder from origin: _____

Contact Person: _____

Tel: _____ Fax: _____

E-mail: _____

Exhibitors Authorization (REMARK : The company's address "which we can use for the invoice".)

Company Name:	Booth No.:
Contact Person:	E-mail:
Address:	
Phone:	Fax:
Signature:	Date

