

| Ship Date | Origin | Dest |
|-----------|--------|------|
| 11/9/23 | DLR | TN |

0083

Contract of Carriage

E113494005

For Service Conditions, Please refer to:
www.expeditors.com/NATServiceConditions

SHIPPER INFORMATION

Shipper Account # _____
 Shipper Name (From) **JCB BANDA LTD**
 Address _____
 City **DLR** State **GA** Code **50107**
 Contact _____ Phone _____

CONSIGNEE INFORMATION

Consignee Account # _____
 Consignee Name (To) **JANARAT AUTOMOBILE AGENCY**
 Address **VALLAM PUDUCHETI, VALLAM TANJAVUR**
 City **TANJAVUR** State **TN** Code **613401**
 Contact _____ Phone _____

Shipper Reference _____

Consignee Reference _____

Payment Method Prepaid Collect 3rd Party If no payment method is selected, Shipper will be billed for all charges.

Service Requested

Same Day
 Next Day
 Second Day
 Three Day
 Deferred (3 to 5 days)

If no service level is selected, shipment moves Next Day or actual service provided.

Handling Information

AM Delivery
 Guaranteed Service
 Saturday Delivery
 Sunday Delivery
 Inside Delivery
 Other

THIRD PARTY INFORMATION

Third Party Account # _____
 Third Party Name (To) _____
 Address _____
 City _____ State _____ Code _____
 Contact _____ Phone _____
 Third Party Billing Reference _____

Special Instructions _____

| PIECES | DESCRIPTION | ACTUAL WEIGHT | LENGTH | WIDTH | HEIGHT |
|--------------|-------------|---------------|--------|-------|--------|
| 3 | | 136 kg | | | |
| TOTAL PIECES | | TOTAL WEIGHT | | | |

Declared Value for Carriage
 Expeditors liability for loss or damage shall be limited per the reverse hereof unless a higher amount is specified here. INR _____

Amount of Insurance
 Insurance - If insurance is requested in accordance with the conditions hereof indicate amount to be insured here. INR _____

International Customs Value INR _____

Does this shipment contain dangerous goods? ONE BOX MUST BE CHECKED

No Yes - as per attached Shippers Declaration Yes - Shippers Declaration Not Required

Shipper's Signature _____
 Print Name _____
 Date / Time _____

Received By: _____
 Signature **AKANNAN**
 Print Name **AKANNAN**
 Date **13/9/23** Time **10:20 AM**