

**TO: GRACE**  
**ATTN: JESSICA**

**FORWARDING INSTRUCTION**

<b>SHIPPER(to appear on B/L)</b> NEW WAVE LOGISTICS BRISBANE OFFICE New Wave Industrial Park Unit 4, 370 Nudgee Road Hendra QLD 4011 Ph: 07 3868 9407 Fax: 07 3868 9401		Shipper - if different to that named on Bill of Landing		Bill of landing No.	
				Export Authority No.	
				Permit No.	
<b>CONSIGNOR</b> YUSEN FRESH CHAIN Co, Ltd. TOKYO YB Bldg. 7F, 1-10-4 Kita Shinagawa, Shinagawa-ku, Tokyo 140-0001  PH: 03-5782-7541, FAX: 03-5782-7644		C/ OFF      3 Jan 2001 ETD         5 Jan 2001			
AS ABOVE		<b>Please issue sea way bill</b>			
<b>Intended Ocean Vessel</b> Feng Yun He	<b>Voy No.</b> V40	<b>Intended Port of Loading</b> BRISBANE			
<b>Port of discharge</b> YOKOHAMA,JAPAN		<b>Final destination</b> YOKOHAMA,JAPAN		<b>Please indicate where freight and charges will be paid</b>	
				<b>Prepaid</b>	<b>Freight</b>
				<b>Collect</b>	<b>Charges(BSRA)</b>
<b>Marks &amp; No.</b>	<b>No. &amp; Kind of pkgs.</b>	<b>Description of goods</b>		<b>Container No. Seal No.</b>	<b>Gross Weight</b>
					<b>Measurement</b>
1 x 20' GENERAL PURPOSE PERSONAL EFFECT					
Mr. Ariki C/NO.1-38	Mr. Ariki	38 pkgs			6.0 cbm
Mr. Yoshida C/NO.1-58	Mr. Yoshida	58 pkgs			7.0 cbm
Mr. Shizawa C/NO.1-46	Mr. Shizawa	46 pkgs			13.0 cbm
Mr. Ando C/NO.1-	Mr. Ando	pkgs			cbm
Student Pack					
<b>Total Packages</b>				<b>Total Gross Weight &amp; Measurement</b>	
<b>Other forwarding instruction to be included in the B/L No.</b>		<b>HAZARDOUS DECLARATION</b> If any item above hazardous? <input type="checkbox"/> If yes, indicate against item(s) concerned:-  Correct Technical Name : IMCO Class : U.N.No. : Flash Point("()": Note : All hazardous goods must be declared at a booking and cargo/container accompanied by Dangerous Goods Certificate IF FREIGHT NOT REQUIRED ON ORIGINAL/COPIES PLEASE INDICATE Y/N ORIGINALS <input type="checkbox"/> COPIES <input type="checkbox"/>			
<b>B/L Type Required</b> Received <input type="checkbox"/> Shipped <input type="checkbox"/>	<b>Carriers will supply</b> Originals <input type="checkbox"/> Copies <input type="checkbox"/>	<b>B/L Release Port</b>			
<b>Place of acceptance</b>		<b>Place of delivery</b>		We certify that the details shown above are true and correct and are subject to the terms and conditions contained in the Carrier's Bill of Landing.	

**TO: FIVE STAR****FORWARDING INSTRUCTION****ATTN: Kylie**

<b>SHIPPER(to appear on B/L)</b> NEW WAVE LOGISTICS BRISBANE OFFICE New Wave Industrial Park Unit 4, 370 Nudgee Road Hendra QLD 4011 Ph: 07 3868 9407 Fax: 07 3868 9401			Shipper - if different to that named on Bill of Landing		Bill of landing No.		
					Export Authority No.		
					Permit No.		
<b>CONSIGNOR</b> YUSEN FRESH CHAIN Co, Ltd. TOKYO YB Bldg. 7F, 1-10-4 Kita Shinagawa, Shinagawa-ku, Tokyo 140-0001  PH: 03-5782-7541, FAX: 03-5782-7644			C/ OFF    08 NOV 2000 ETD        10 NOV 2000				
AS ABOVE			<b>Please issue sea way bill</b>				
<b>Intended Ocean Vessel</b> EVER ABLE		<b>Voy No.</b> V623	<b>Intended Port of Loading</b> BRISBANE				
<b>Port of discharge</b> YOKOHAMA,JAPAN		<b>Final destination</b> YOKOHAMA,JAPAN	<b>Please indicate where freight and charges will be paid</b>		<b>Freight</b>	<b>Charges(BSRA)</b>	
				<b>Prepaid</b>			
				<b>Collect</b>			
<b>Marks &amp; No.</b>	<b>No. &amp; Kind of pkgs.</b>	<b>Description of goods</b>			<b>Container No. Seal No.</b>	<b>Gross Weight</b>	<b>Measure-ment</b>
1 x 40' GENERAL PURPOSE PERSONAL EFFECT						2258 kgs	
Mr. Ariki C/NO.1-38	Mr. Ariki	38 pkgs	Container #: UXXU2413146 SEAL #: 1569				3.0 cbm
Mr. Yoshida C/NO.1-58	Mr. Yoshida	58 pkgs					8.0 cbm
Mr. Shizawa C/NO.1-46	Mr. Shizawa	46 pkgs					5.0 cbm
Mr. Ando C/NO.1-	Mr. Ando	pkgs					4.1 cbm
Student Pack							
<b>Total Packages</b>		<b>Total Gross Weight &amp; Measurement</b>			2258 kgs	20.1 cbm	
<b>Other forwarding instruction to be included in the B/L No.</b>			<b>HAZARDOUS DECLARATION</b>				
			If any item above hazardous? <input type="checkbox"/> If yes, indicate against item(s) concerned:-				
			Correct Technical Name : IMCO Class : U.N.No. : Flash Point("()": Note : All hazardous goods must be declared at a booking and cargo/container accompanied by Dangerous Goods Certificate IF FREIGHT NOT REQUIRED ON ORIGINAL/COPIES PLEASE INDICATE Y/N				
<b>B/L Type Required</b>		<b>Carriers will supply</b>		<b>B/L Release Port</b>			
Received <input type="checkbox"/>		Originals <input type="checkbox"/>					
Shipped <input type="checkbox"/>		Copies <input type="checkbox"/>					
Place of acceptance		Place of delivery		We certify that the details shown above are true and correct and are subject to the terms and conditions contained in the Carrier's Bill of Landing.			
				ORIGINALS <input type="checkbox"/> COPIES <input type="checkbox"/>			

**TO: Cosco**  
**ATTN: Melissa**

**FORWARDING INSTRUCTION**

<b>SHIPPER(to appear on B/L)</b> NEW WAVE LOGISTICS BRISBANE OFFICE New Wave Industrial Park Unit 4, 370 Nudgee Road Hendra QLD 4011 Ph: 07 3868 9407 Fax: 07 3868 9401			Shipper - if different to that named on Bill of Landing		Bill of landing No. <hr/> Export Authority No. <hr/> Permit No.		
<b>CONSIGNEE</b> YUSEN FRESH CHAIN Co, Ltd. TOKYO YB Bldg. 7F, 1-10-4 Kita Shinagawa, Shinagawa-ku, Tokyo 140-0001  PH: 03-5782-7541, FAX: 03-5782-7644			C/ OFF    17 Jan '01 ETD        19 Jan '01  <b>Please issue sea way bill</b>				
<b>Notify Party</b>  AS ABOVE							
<b>Intended Ocean Vessel</b> Ever Able	<b>Voy No.</b> V633	<b>Intended Port of Loading</b> BRISBANE					
<b>Port of discharge</b> YOKOHAMA,JAPAN		<b>Final destination</b> YOKOHAMA,JAPAN	<b>Please indicate where freight and charges will be paid</b>		<b>Freight</b>	<b>Charges(BSRA)</b>	
<b>Marks &amp; No.</b>		<b>No. &amp; Kind of pkgs.</b>	<b>Description of goods</b>		<b>Container No.</b> CBHU0862347 <b>Seal No.</b> 541439	<b>Gross Weight</b>	<b>Measure-ment</b>
1 x 20' GENERAL PURPOSE PERSONAL EFFECT  Mr. Nishihara            Mr. Nishihara            113 pkgs C/NO.1-113			Container Release <b>COS-882</b>			15 cbm	
<b>Total Packages</b>		113	<b>Total Gross Weight &amp; Measurement</b>			15.0cbm	
<b>Other forwarding instruction to be included in the B/L No.</b>			<b>HAZARDOUS DECLARATION</b> If any item above hazardous? <input type="checkbox"/> If yes, indicate against item(s) concerned:-  Correct Technical Name : IMCO Class : U.N.No. : Flash Point("()": Note : All hazardous goods must be declared at a booking and cargo/container accompanied by Dangerous Goods Certificate IF FREIGHT NOT REQUIRED ON ORIGINAL/COPIES PLEASE INDICATE Y/N ORIGINALS <input type="checkbox"/> COPIES <input type="checkbox"/>				
<b>B/L Type Required</b> Received <input type="checkbox"/> Shipped <input type="checkbox"/>		<b>Carriers will supply</b> Originals <input type="checkbox"/> Copies <input type="checkbox"/>		<b>B/L Release Port</b>			
<b>Place of acceptance</b>		<b>Place of delivery</b>		We certify that the details shown above are true and correct and are subject to the terms and conditions contained in the Carrier's Bill of Landing.			

## SHIPPERS LETTER OF INSTRUCTION

**RRLAWSON PTY LTD**

SHIPPER(to appear on B/L)		Shipper - if different to that named on Bill of Landing		Bill of lading No.			
				Export Authority No. (ECN)			
				Booking NO.			
CONSIGNEE							
Notify Party							
Intended Ocean Vessel	Voy No.					Intended Port of Loading	
Port of discharge		Final destination		Please indicate where freight and charges will be paid			
				Prepaid	Freight		
				Collect	Charges(BSRA)		
Marks & No.	No. & Kind of pkgs.	Description of goods			Container No. Seal No.	Gross Weight	Measure-ment
Total Packages		Total Gross Weight & Measurement					
Other forwarding instruction to be included in the B/L No.		<b>HAZARDOUS DECLARATION</b> If any item above hazardous? <input type="checkbox"/> If yes, indicate against item(s) concerned:-  Correct Technical Name : IMCO Class : U.N.No. : Flash Point("): Note : All hazardous goods must be declared at a booking and cargo/container accompanied by Dangerous Goods Certificate IF FREIGHT NOT REQUIRED ON ORIGINAL/COPIES PLEASE INDICATE Y/N <div style="text-align: center;">                     ORIGINALS <input type="checkbox"/> COPIES <input type="checkbox"/> </div>					
B/L Type Required		Carriers will supply		B/L Release Port			
Received		Originals					
Shipped		Copies					
Place of acceptance		Place of delivery		We certify that the details shown above are true and correct and are subject to the terms and conditions contained in the Carrier's Bill of Landing.			

**TO:**  
**ATTN:**

**FORWARDING INSTRUCTION**

<b>SHIPPER(to appear on B/L)</b> NEW WAVE LOGISTICS BRISBANE OFFICE			Shipper - if different to that named on Bill of Landing		Bill of landing No.	
					Export Authority No.	
					Permit No.	
<b>CONSIGNOR</b> YUSEN FRESH CHAIN CO. LTD 7F YB BLDG., 1-10-4 KITASHINAGAWA SHINAGAWA-KU, TOKYO JAPAN 140-0001  Ph: 03-5782-7541 Fax: 03-5782-7644			C/ OFF ETD  <b>Please issue sea way bill</b>			
AS ABOVE						
<b>Intended Ocean Vessel</b> MSC FLORIDA	<b>Voy No.</b> v22	<b>Intended Port of Loading</b> BRISBANE				
<b>Port of discharge</b> YOKOHAMA		<b>Final destination</b> YOKOHAMA, JAPAN	<b>Please indicate where freight and charges will be paid</b>		<b>Freight</b>	<b>Charges(BSRA)</b>
					<b>Prepaid</b>	
					<b>Collect</b>	
<b>Marks &amp; No.</b>	<b>No. &amp; Kind of pkgs.</b>	<b>Description of goods</b>	<b>Container No. Seal No.</b>	<b>Container No. Seal No.</b>	<b>Gross Weight</b>	<b>Measure-ment</b>
<b>Total Packages</b>			<b>Total Gross Weight &amp; Measurement</b>			
<b>Other forwarding instruction to be included in the B/L No.</b>			<b>HAZARDOUS DECLARATION</b>			
			If any item above hazardous? <input type="checkbox"/>		If yes, indicate against item(s) concerned:-	
			Correct Technical Name : IMCO Class : U.N.No. : Flash Point("()": Note : All hazardous goods must be declared at a booking and cargo/container accompanied by Dangerous Goods Certificate			
<b>B/L Type Required</b>		<b>Carriers will supply</b>	<b>B/L Release Port</b>			
Received	<input type="checkbox"/>	Originals	<input type="checkbox"/>			
Shipped	<input type="checkbox"/>	Copies	<input type="checkbox"/>			
			ORIGINALS		<input type="checkbox"/>	COPIES <input type="checkbox"/>
<b>Place of acceptance</b>		<b>Place of delivery</b>		We certify that the details shown above are true and correct and are subject to the terms and conditions contained in the Carrier's Bill of Landing.		