

# CARGOWORKS

CO. REG. No. 2012/075135/07

VAT REG NO. 4430138760

P.O. BOX 8876, EDENGLLEN 1610  
www.cargoworks.co.za

JOHANNESBURG  
☎ (011) 873-1212  
FAX (011) 873-0716

CAPE TOWN  
☎ (021) 934-8040  
FAX (021) 934-8030

DURBAN  
☎ (031) 702-0262  
FAX (031) 702-6218

PORT ELIZABETH  
☎ (041) 488-1092  
FAX (041) 488-1096

NELSPRUIT  
☎ (013) 758-2067  
FAX (013) 758-2068

EAST LONDON  
☎ (043) 736-6077  
FAX (043) 736-1424

**PROOF OF DELIVERY**

DATE 30-9-16 ORIGIN JBN DEST. JHB LINEHAUL VEHICLE \_\_\_\_\_ WAYBILL NO. 2900006

FOR ACCOUNT OF:  
(POSTAL ADDRESS)

ACCOUNT NO.

SENDER'S NAME AND ADDRESS <u>Life Entabeni Hospital</u>		RECEIVERS NAME AND ADDRESS <u>Priontex (JHB)</u>	
<u>148 South Ridge R.D. Berea</u>		<u>EL</u>	
SENDER'S NAME: <u>Ayanda</u>		PHONE: <u>(031) 204 1300</u>	CONTACT NAME: _____
		POSTAL CODE: _____	PHONE: _____



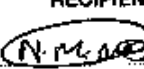
NO INSURANCE IS PROVIDED. PLEASE ENSURE THAT GOODS ARE ADEQUATELY INSURED.  
NO DELIVERIES OR COLLECTIONS TO RESIDENTIAL AREAS OR CHAINSTORES.

QTY PACKS	PACKAGING	CONTENTS	DIMENSIONS (CM)			VOLUME WEIGHT	ACTUAL MASS KG
			L	B	H		
1	Box	Soiled Gowns	76	47	35		

SPECIAL INSTRUCTIONS:

CHARGEABLE WEIGHT

18 kg

<b>SENDER</b>  SIGNATURE: <u>Ayanda</u> PRINT NAME: <u>30-9-16 08h00</u> DATE: TIME:	<b>COLLECTED BY</b> Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <u>S/a</u> PRINT NAME: <u>30/9/16</u> DATE: TIME:	<b>DELIVERED BY</b>  SIGNATURE: <u>M. M. M.</u> PRINT NAME: <u>07/10/16</u> DATE: TIME:	<b>RECIPIENT</b>  SIGNATURE: <u>N. M. M.</u> PRINT NAME: <u>08/10/16</u> DATE: TIME:	<b>FOR OFFICE USE ONLY</b> <table border="1"> <tr> <td>RATE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CHARGE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>SURCHARGE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>DOCUMENT FEE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>V.A.T</td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>TOTAL</b></td> <td></td> <td></td> <td></td> </tr> </table>	RATE				CHARGE				SURCHARGE				DOCUMENT FEE				V.A.T				<b>TOTAL</b>			
RATE																												
CHARGE																												
SURCHARGE																												
DOCUMENT FEE																												
V.A.T																												
<b>TOTAL</b>																												

By your signature, you confirm that you have read the Conditions of Consignment on the back of this document and that you agree to be bound by all the Conditions

PLEASE USE BALL POINT PEN AND PRESS HARD