

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) 873-0715

PORT ELIZABETH
☎ (041) 486-1092
FAX (041) 486-1096

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

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

DURBAN
☎ (031) 702-0252
FAX (031) 702-6218

EAST LONDON
☎ (043) 738 6077
FAX (043) 736-1424

443 BL

PROOF OF DELIVERY

| | | | | |
|------|--------|-------|------------------|----------------------------|
| DATE | ORIGIN | DEST. | LINEHAUL VEHICLE | WAYBILL NO. 3294194 |
|------|--------|-------|------------------|----------------------------|

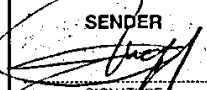
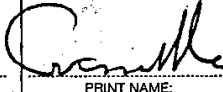
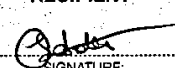
| | |
|-------------------------------------|---------------------------|
| FOR ACCOUNT OF: (POSTAL ADDRESS) | ACCOUNT NO. MAPOO1 |
|-------------------------------------|---------------------------|

| | | | |
|---|--------|---|--------|
| SENDER'S NAME AND ADDRESS PRIONTEX 33 LESTER RD, KUNBURG, CAPE TOWN | | RECEIVER'S NAME AND ADDRESS PRIONTEX MICRON CLEAN. R101 OLD PRETORIA RD, SAGE CORP. PARK NORTH, ROME CHILL. RANDJIESFONTEIN | |
| SENDER'S NAME: SHAMIL | PHONE: | CONTACT NAME: CARLA | 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 | | |
| 411 | CARTONS | 8 X | 45 | 45 | 50 | | 192 |
| 2 | | 1 X | 40 | 39 | 56 | | 5.06 |
| | | 1 X | 40 | 39 | 30 | | 2.38 |
| | | 1 X | 45 | 45 | 36 | | 15.94 |
| | | 1 X | 45 | 45 | 60 | | |
| | | 1 X | 45 | 45 | 30 | | |
| 13 Boxes IN TOTAL | | | | | | | |

| | |
|-----------------------|---------------------------------|
| SPECIAL INSTRUCTIONS: | CHARGEABLE WEIGHT 215.38 |
|-----------------------|---------------------------------|

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|--|------|--|--|--|--------|--|--|--|-----------|--|--|--|--------------|--|--|--|-----|--|--|--|--------------|--|--|--|
| SENDER  SIGNATURE: SHAMIL PRINT NAME: 17/5/2019 DATE: | COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  PRINT NAME: 17/5/19 DATE: | DELIVERED BY BRIAN PRINT NAME: 20/05/19 DATE: | RECIPIENT  SIGNATURE: BRIAN PRINT NAME: 20/05/2019 11:38 DATE: | FOR OFFICE USE ONLY <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>VAT</td> <td></td> <td></td> <td></td> </tr> <tr> <td>TOTAL</td> <td></td> <td></td> <td></td> </tr> </table> | RATE | | | | CHARGE | | | | SURCHARGE | | | | DOCUMENT FEE | | | | VAT | | | | TOTAL | | | |
| RATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CHARGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SURCHARGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DOCUMENT FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VAT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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 BALLPOINT PEN AND PRESS HARD