

CARGOWORKS

CO. REG. No. 2012/075135/07

VAT REG NO. 4430138760

P.O. BOX 8876, EDENGLLEN 1610
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JOHANNESBURG
(011) 873-1212
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FAX (021) 934-8030

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FAX (031) 702-6218

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(041) 486-1092
FAX (041) 486-1096

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

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

PJPNO3

PROOF OF DELIVERY

DATE 08/07/16	ORIGIN JHB	DEST. B7N	LINEHAUL VEHICLE	WAYBILL NO. 2092010
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FOR ACCOUNT OF: (POSTAL ADDRESS)	ACCOUNT NO. 1001001
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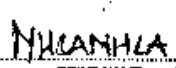

SENDER'S NAME AND ADDRESS PRION TEX JHB 313 ROAN CRESCENT NORWICH		RECEIVER'S NAME AND ADDRESS 12 CAPT PROCTOR STRAT BRANDWAG BOESMANSTEIN POSTAL CODE:	
SENDER'S NAME: Jucy	PHONE: 0112375900	CONTACT NAME: PIETER SMITS	PHONE: 0826676644

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		
3	Packed	Boxes only OBL #: 38844-0	445	45	50		57KG

SPECIAL INSTRUCTIONS:

CHARGEABLE WEIGHT

SENDER  SIGNATURE: Jucy PRINT NAME: 08/07/16 DATE: TIME:	COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  PRINT NAME: 08/07/16 DATE: TIME:	DELIVERED BY PRINT NAME: DATE: TIME:	RECIPIENT  SIGNATURE: P Smits PRINT NAME: 11/07/16 11:45 DATE: TIME:	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>V.A.T</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				V.A.T				TOTAL			
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By your signature, you confirm that you have read the Conditions of Carriage 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