

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

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

DURBA
☎ (031) 702-021
FAX (031) 702-621

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

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

EAST LONDO
☎ (043) 736 601
FAX (043) 736-141

PROOF OF DELIVER

DATE: 10/09/18 ORIGIN: JHB DEST: CPT LINEHAUL VEHICLE: 11438/1 WAYBILL NO. 3222486

FOR ACCOUNT OF:
(POSTAL ADDRESS)

ACCOUNT NO. MAP-002

SENDERS NAME AND ADDRESS

Prionter Micronclean Gauteng
313 Raan Crecent, Corporate
Park North, MIDRAND

RECEIVERS NAME AND ADDRESS

Prionter Micronclean (PTY) LTD
35 LESTER ROAD, WYNBERG
CAPE TOWN POSTAL CODE: 7800

SENDERS NAME:
JERRY

PHONE:

011 2575900

CONTACT NAME:

Shamil Begg

PHONE:

021 7971878

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		
02	BOXES	Eurotape 4cm x 100m	53	53	24		40KG
05	BOXES	Exam Gloves Large	24	28	24		23KG
01	BOXES	Prionter Inserts	32	39	10		8KG
06	BOXES	Steti-REEL 380mm x 200m	25	34	34		109KG
10	BOXES	Steti-REEL 300mm x 200m	23	34	31		150KG

SPECIAL INSTRUCTIONS:

CHARGEABLE
WEIGHT

SENDER J. M. M. K. O. N. SIGNATURE: JERRY PRINT NAME: 10/09/18 10:45 DATE: TIME:		COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Brian S. M. S. B. PRINT NAME: 10/09/18 DATE: TIME:		DELIVERED BY Shamil Begg PRINT NAME: 12/09/18 12:05 DATE: TIME:		RECIPIENT SIGNATURE: SHAMIL PRINT NAME: 12/09/18 12:29 DATE: TIME:		FOR OFFICE USE ONLY <table border="1"> <tr> <th>RATE</th> <th>CHARGE</th> <th>SURCHARGE</th> <th>DOCUMENT FEE</th> <th>V.A.T</th> <th>TOTAL</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>				RATE	CHARGE	SURCHARGE	DOCUMENT FEE	V.A.T	TOTAL						
RATE	CHARGE	SURCHARGE	DOCUMENT FEE	V.A.T	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