

## DSV

2 2 2 E E E 2 2 2

SUB HT	04270383
SUB HT	04270384
SUB HT	04270385
SUB HT	04270386

4 102-90-6

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name <b>LE CREVET WATERFALL</b>		Company Name <b>LE CREVET GAUTENG WAREHOUSE</b>						<input checked="" type="checkbox"/> Same Day	
Street Address <b>SHOP 101</b>		Street Address <b>4 EASTGATE BUSINESS PARK, CNR SOUTH 201 MARLBORO DRIVE</b>						<input type="checkbox"/> Express	
Suburb <b>WATERFALL MALL</b>		Suburb <b>SANDTON</b>						<input type="checkbox"/> With Sunrise Option	
City/Town <b>RUSTENBURG</b> Postal Code <b>0299</b>		City/Town <b>JOHANNESBURG</b> Postal Code <b>2196</b>						<input type="checkbox"/> With Saturday Service	
Contact <b>MANAGER LERATO</b>		Contact <b>ATT: DUANE DAVIDS</b>						<input type="checkbox"/> Public Holiday Service	
Phone <b>014 537-2279</b>		Phone						<input checked="" type="checkbox"/> Economy	
Destination Country		South Africa		Botswana		Lesotho		Namibia	
								Swaziland	
								Other (Please Specify)	
Sender's Reference <b>MARLETING MATERIALS</b>		Analysis Code <b>LE CREVET WATERFALL</b>						<input type="checkbox"/> After Hours	
<b>SPECIAL INSTRUCTIONS</b> Tariff Code <b>021766</b> Bill To <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.									
1. ONLINE <input type="checkbox"/>  3. EFT <input type="checkbox"/>									
SENDER'S AUTHORISED SIGNATURE <b>[Signature]</b> DATE <b>21/08/2018</b>									
e-mail / Fax / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number									
<b>Total Parcels</b> NO. OF PARCELS PER DIMENSIONS LENGTH (CM) WIDTH (CM) HEIGHT (CM) <b>5</b> <b>530</b> <b>34</b> <b>34</b> <b>34</b> <b>530</b> <b>34</b> <b>34</b> <b>34</b> <b>34</b> <b>530</b> <b>34</b> <b>34</b> <b>34</b> <b>34</b>									
<b>Total Mass (Kg)</b> <b>77</b>									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <b>DUANE</b>					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <b>LE CREVET</b>				
Date Received: <b>220818</b>					Date Received: <b>210818</b>				
Time Received: <b>1010</b>					Time Received: <b>1406</b>				
Signature: <b>[Signature]</b>					Signature: <b>[Signature]</b>				

Version Control: m1 (2018)