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EMIT 321495

ACCOUNT NUMBER
MOV001

CLIENT REFERENCE
763-Stat

OFFICE REFERENCE
763-Stat

DATE

SENDER (Your Name)		TEL 021 831 7170		RECEIVER (Name)			
COMPANY (Name) LE CREUSET BORENSET WEST				COMPANY (Name) LE CREUSET BROOKLYN			
STREET ADDRESS (Dept./Floor) UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL ES OLD PARADEVLIE ROAD				STREET ADDRESS (Dept./Floor) SHOP 315 BROOKLYN MALL DNR VERLE WATERKLOOF ROAD			
CITY BORENSET WEST		SUBURB 7130		CITY BROOKLYN		SUBURB	
NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
4	BOXES	62	42	38		111	
1	BOX	54	32	27		4	
3	BOXES	46	46	52		84	
1	BOX	46	46	27		5	
2	BOXES	48	36	42		34	
1	BOX	40	26	50		9	
1	BOX	35	35	35		2	
TEST WEIGHT (OFFICE USE)						249Kg	

COLLECTED BY:

SIGNATURE: *[Signature]*

DATE: TIME:

SERVICES PLEASE SELECT SERVICE / IN BOX

DOOR TO DOOR
ECONOMY ☐

DIRECT LOAD ☐

AIR ☐

SAME DAY ☐

HAZARDOUS CARGO ☐

OFFICE USE ONLY

NAME

DATE

SIGN

OUR SIGNATURE ACKNOWLEDGES WE HAVE SEEN AND UNDERSTOOD AND AGREE TO BE BOUND BY
TERMS AND CONDITIONS OF CARRIAGE (SEE REVERSE)

CHECKED IN

Loes

01-11-16

[Signature]

SENDER'S SIGNATURE: *[Signature]*

DATE 1-11-16

CHECKED OUT

Loes

1/11/16

[Signature]

PRINT NAME: FRANK

TIME

CHECKED IN

CHECKED OUT

RECEIVER'S SIGNATURE: *[Signature]*

DATE 03/11/16

PRINT NAME: Bongi

TIME 13:45

WHEN NO SERVICE IS INDICATED WE RESERVE THE RIGHT TO DESPATCH AND CHARGE AT THE PUBLISHED STANDARD RATES.
WE DRAW YOUR ATTENTION TO THE SUMMARISED VERSION OF OUR TERMS & CONDITIONS AS ACCEPTED BY YOU ON THE REVERSE OF OUR WAYBILL.
YOU ACKNOWLEDGE THAT YOU HAVE THE AUTHORITY TO ACCEPT THESE TERMS & CONDITIONS FOR AND ON BEHALF OF THE CUSTOMER.