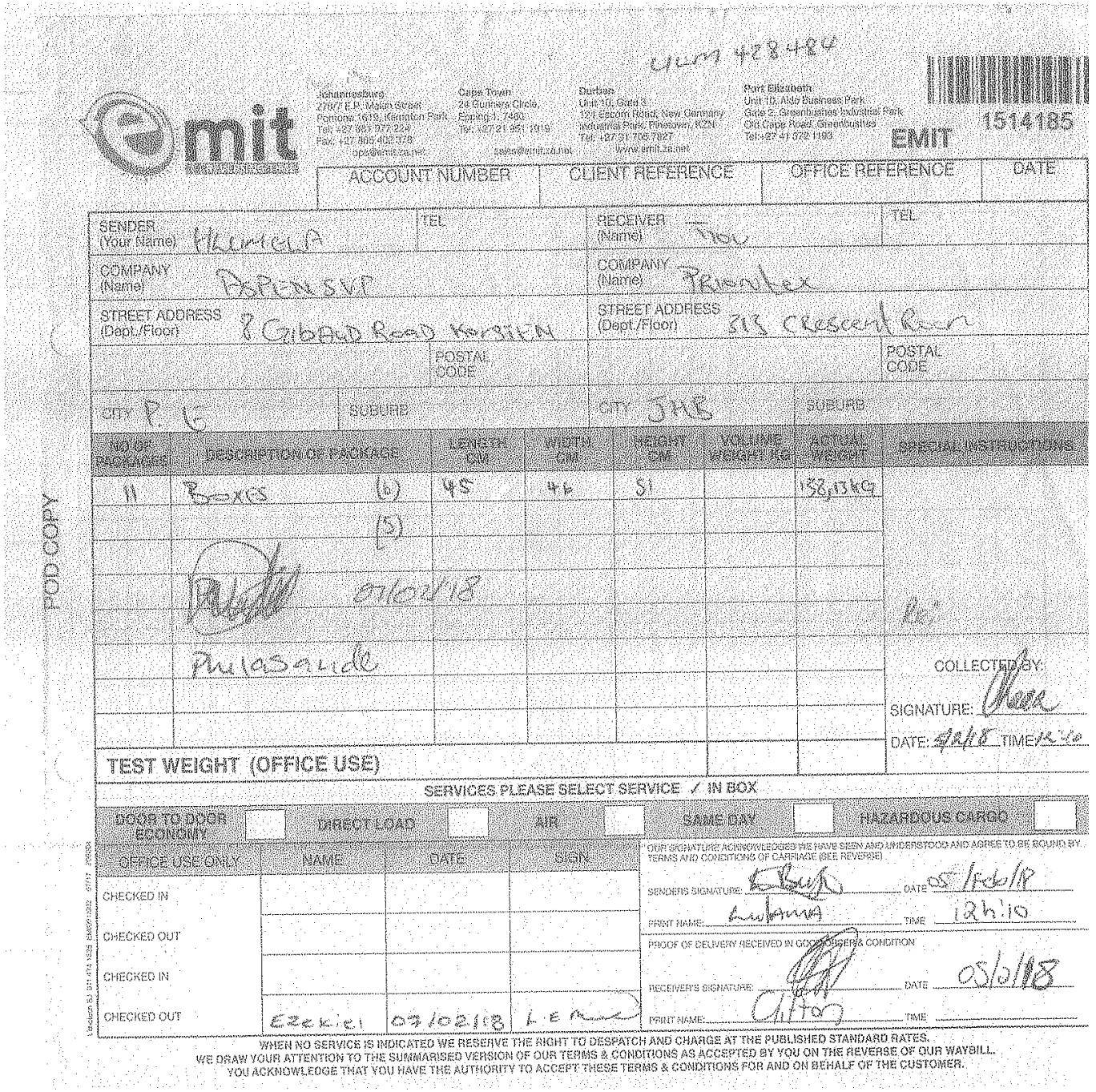

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1514185

EMIT

ACCOUNT NUMBER	CLIENT REFERENCE	OFFICE REFERENCE	DATE

SENDER (Your Name) Hlumela	TEL	RECEIVER (Name) —	TEL
COMPANY (Name) Dispensyp		COMPANY (Name) Transtex	
STREET ADDRESS (Dept./Floor) 8 Gibaud Road Kensikn		STREET ADDRESS (Dept./Floor) 813 Crescent Rd	
	POSTAL CODE		POSTAL CODE
CITY P E	SUBURB	CITY JHB	SUBURB

NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
11	Boxes (6)	45	46	51		138,13kg	
	(5)						
	07/02/18						
	Pinlasande						

COLLECTED BY:
SIGNATURE:
DATE: 7/2/18 TIME: 12:40

TEST WEIGHT (OFFICE USE)

SERVICES PLEASE SELECT SERVICE ✓ IN BOX

DOOR TO DOOR ECONOMY		DIRECT LOAD		AIR		SAME DAY		HAZARDOUS CARGO	

OFFICE USE ONLY	NAME	DATE	SIGN
CHECKED IN			
CHECKED OUT			
CHECKED IN			
CHECKED OUT	Ezekiel	09/02/18	

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

SENDERS SIGNATURE: _____ DATE 05/02/18

PRINT NAME: Lindiwe TIME 12h10

PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION

RECEIVER'S SIGNATURE: _____ DATE 05/02/18

PRINT NAME: Alton TIME _____

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.

POD COPY

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