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EMIT 1496742

ACCOUNT NUMBER 180463	CLIENT REFERENCE	OFFICE REFERENCE	DATE
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SENDER (Your Name) TIOY		TEL 011 237 5011		RECEIVER (Name) HLUMELA		TEL (041) 4072001	
COMPANY (Name) PRIOITEX MICROCLEAN				COMPANY (Name) ASPEN BVP			
STREET ADDRESS (Dept./Floor) 313 ROAD CRESCENT OFF R101 OLD PRETORIA ROAD				STREET ADDRESS (Dept./Floor) S GIBAUD ROAD KORSTEN			
RANDJIESFONTEIN		POSTAL CODE		PORT ELIZABETH		POSTAL CODE	
CITY		SUBURB		CITY		SUBURB	
NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
10	BOXED	45	45	50		200K G	
	DELNOTE-55783-2						
	10						
	BOXES						
TEST WEIGHT (OFFICE USE)						COLLECTED BY:	
						SIGNATURE: <i>Ngweni</i>	
						DATE: 09/02/18	

SERVICES PLEASE SELECT SERVICE ✓ IN BOX

DOOR TO DOOR ECONOMY	<input checked="" type="checkbox"/>	DIRECT LOAD	<input type="checkbox"/>	AIR	<input type="checkbox"/>	SAME DAY	<input type="checkbox"/>	HAZARDOUS CARGO	<input type="checkbox"/>
OFFICE USE ONLY	NAME	DATE	SIGN	<small>OUR SIGNATURE ACKNOWLEDGES WE HAVE READ AND UNDERSTOOD AND AGREE TO BE BOUND BY TERMS AND CONDITIONS OF CARRIAGE (SEE REVERSE)</small>					
CHECKED IN	Sydney	09/02/18	Ed	SENDER'S SIGNATURE: <i>HLUMELA</i> DATE: 09-02-2018					
CHECKED OUT				PRINT NAME: <i>TIOY</i> TIME: 18:00					
CHECKED IN				PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION					
CHECKED OUT				RECEIVER'S SIGNATURE: <i>[Signature]</i> DATE: 12-02-2018					
				PRINT NAME: <i>TIOY</i> 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.