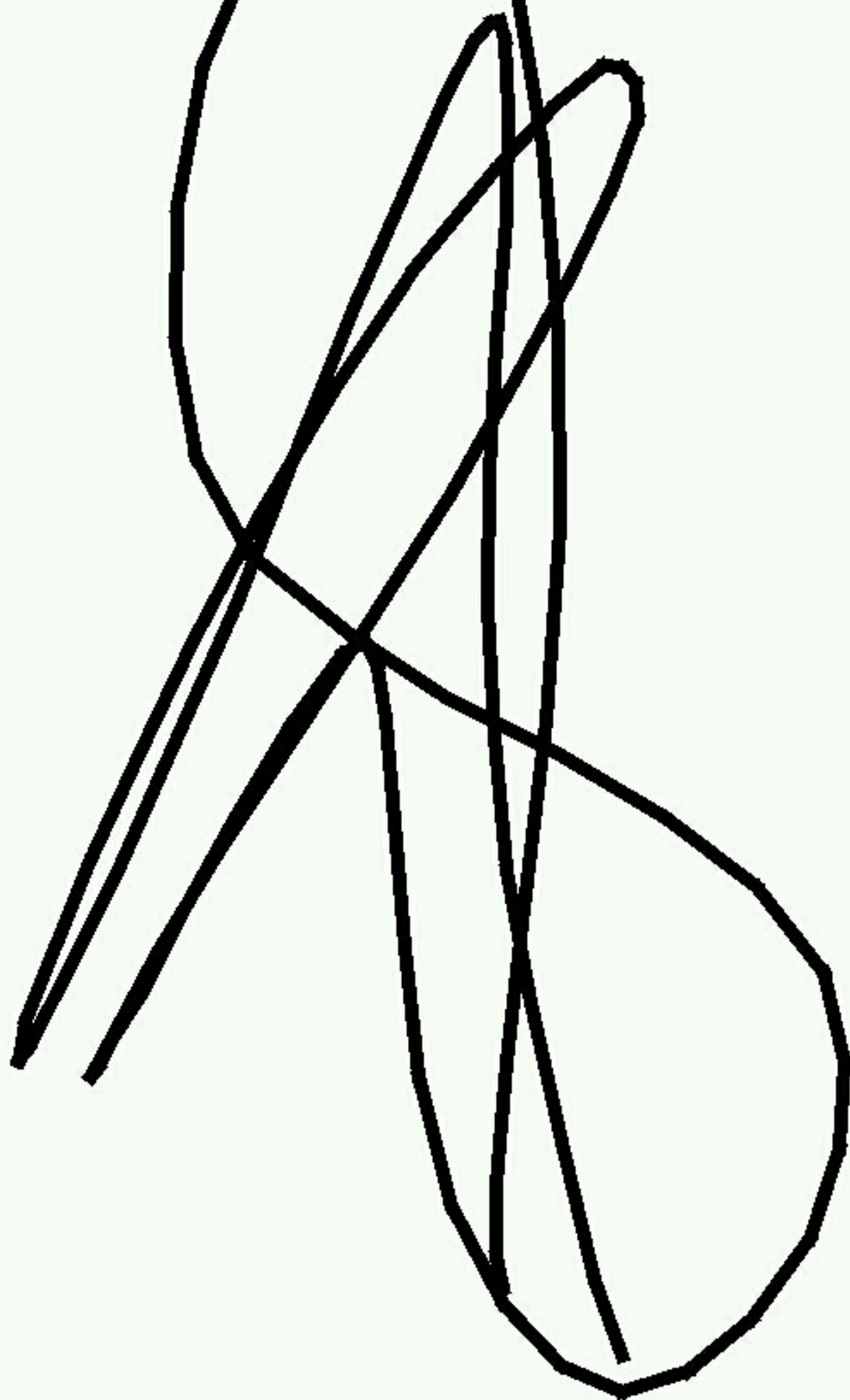


WAYBILL: 069908476990

RECEIVED: Robyn

TIMESTAMP: 14/11-2017 16:23

A large, stylized handwritten signature in black ink, written over the text area. The signature is composed of several overlapping loops and strokes, making it difficult to decipher. It appears to be a cursive or calligraphic style.

WAYBILL: 069908476990

RECEIVED: Robyn

TIMESTAMP: 14-11-2017 16:23



069908476990

Shipper's Reference Number		To: (Recipient's Name)		Their Phone Number	
Your Phone Number		Company Name			
Street Address: (P.O. Boxes are not deliverable) Dept/Floor					
Postal Code		City		Postal Code	
Country					

SPECIAL INSTRUCTIONS / ADDITIONAL SERVICES (PLEASE SPECIFY)

RIGHT SERVICES (ONLY FOR THE FOLLOWING DESTINATIONS)

☐ SWAZILAND ☐ MOZAMBIQUE ☐ NAMIBIA

INTERNATIONAL SERVICES

REMAIL ☐
AIRFREIGHT ☐

Customs Value

Insurance Value

DOMESTIC SERVICES

OVERNIGHT EXPRESS BY 10H30

OVERNIGHT BY 13H00

BUDGET CARGO

SAME DAY EXPRESS

DESCRIPTION OF PACKING AND CONTENTS

HEALTH
FOR LETELE
GISTIC CENTRE

011 2011

CIA. ROAD
BAG X5049
LEY 8300

DIMENSIONS (CENTIMETRES)
LENGTH BREATH HEIGHT

VOL. WEIGHT
Kg's

ACTUAL WEIGHT
Kg's

10 40 55

15.211

CONTENTS NOT CHECKED

Signature

FREIGHT CHARGE

FUEL SURCHARGE

OTHER

INSURANCE

SAME-DAY
SURCHARGE

TOTAL EXCL.
VAT

VAT

TOTAL
INCL. VAT R

Y DELIVERY
ESTIC
ONLY

YES

NO

INSURANCE REQUIRED
ABOVE R1000?

YES

NO

DELIVERY
BY 8:30

YES

NO

RECEIVED BY
SKYNET WORLDWIDE EXPRESS

SIGNATURE

RECEIVED IN GOOD ORDER AND CONDITION

CONSIGNEE
SIGNATURE

PRINT NAME

DATE

Robyn

14/11/17 TIME 9:00

PARCEL STICKERS

UNLESS INDICATED ON THE FACE HEREOF, SKYNET WORLDWIDE EXPRESS RESERVES THE RIGHT TO DESPATCH AND CHARGE AT THE PUBLISHED DOMESTIC BUDGET CARGO TARIFF



HEAD OFFICE
P.O. BOX 8807
EDENGLLEN 1613
SOUTH AFRICA
TEL (011) 586-1000
FAX (011) 586-1272



069908476990

A DIVISION OF
CROSSROADS DISTRIBUTION (PTY) LTD
VAT REG NO 4510265798
REG NO 2011/010443/07

File No	Origin	Date	Destination
---------	--------	------	-------------

Shipper's Account Number 317991		Shipper's Reference Number		To Recipients Name: DR Andrew Lelele Leg Loe		Their Phone Number	
Shipper (Your Name) NGELE		Your Phone Number 0112375900		Company Name			
Company Name PELONTEX Microclean Cleaning				Street Address (P.O. Boxes are not deliverable) Dept/Floor 16 Fabricia Road BOX			
Street Address (Dept/Floor) 407 2200 Crescent Corporate Park				DELIVERIES			
City T+B		Postal Code 1683		City Kimberly		Postal Code 8301	
Country RSA				Country RSA			

SPECIAL INSTRUCTIONS / ADDITIONAL SERVICES (PLEASE SPECIFY)

INTERNATIONAL - BUDGET FREIGHT SERVICES (ONLY FOR THE FOLLOWING DESTINATIONS)				Customs Value		Insurance Value	
BOTSWANA	<input type="checkbox"/>	LESOTHO	<input type="checkbox"/>	SWAZILAND	<input type="checkbox"/>	MOZAMBIQUE	<input type="checkbox"/>
NAMIBIA	<input type="checkbox"/>						
INTERNATIONAL SERVICES				DOMESTIC SERVICES			
COURIER DOCUMENT EXPRESS		REMAIL		OVERNIGHT EXPRESS BY 10:30		BUDGET CARGO	
COURIER PARCEL EXPRESS		AIRFREIGHT		OVERNIGHT BY 13:00		SAME DAY EXPRESS	

NO. OF PKGS	DESCRIPTION OF PACKING AND CONTENTS	DIMENSIONS (CENTIMETRES)			VOL WEIGHT Kg's	ACTUAL WEIGHT Kg's	FREIGHT CHARGE	FUEL SURCHARGE	OTHER	INSURANCE	SAME DAY SURCHARGE	TOTAL EXCL VAT	VAT
		LENGTH	BREADTH	HEIGHT									
20	<div style="border: 2px solid black; padding: 5px;"> <p>16 FABRICIA ROAD PRIVATE BAG X5049 KIMBERLEY 8300</p> </div>	40	40	55	15.24	15.24							
<div style="border: 1px solid black; padding: 5px;"> <p>16 FABRICIA ROAD PRIVATE BAG X5049 KIMBERLEY 8300</p> </div>		<p>CONTENTS NOT CHECKED</p>											

HAZARDOUS CARGO?	YES	NO	SATURDAY DELIVERY FOR DOMESTIC SERVICES ONLY	YES	NO	INSURANCE REQUIRED ABOVE R1000	YES	NO	DELIVERY BY 8:30	YES	NO	TOTAL INCL VAT R
------------------	-----	----	----------------------------------------------	-----	----	--------------------------------	-----	----	------------------	-----	----	------------------

<p>I HAVE SEEN AND AGREE TO THE STANDARD CONDITIONS OF CARRIAGE OF SKYNET WORLDWIDE EXPRESS</p>		<p>RECEIVED BY SKYNET WORLDWIDE EXPRESS</p>		<p>RECEIVED IN GOOD ORDER AND CONDITION</p>		<p>PARCEL STICKERS</p>
<p>SIGNATURE</p>		<p>SIGNATURE</p>		<p>CONSIGNEE SIGNATURE</p>		
<p>PRINT NAME</p>		<p>PRINT NAME</p>		<p>PRINT NAME</p>		

P.O.D. - DEST COPY

UNLESS NOTICED ON THE FACE HEREOF SKYNET WORLDWIDE EXPRESS RESERVES THE RIGHT TO DESPATCH AND CHARGE AT THE FULL APPLICABLE DOMESTIC BUDGET CARGO TARIFF

PLEASE COMPLETE ALL SHADED AREAS AS INDICATED IN RED



DELIVERY AND COLLECTION DOCUMENT

DATE: _____

INVOICE NUMBER: _____

FROM: PRIONTEX []

Turfontein [] Midrand []


CLIENT [] _____

TO: PRIONTEX []

Turfontein [] Midrand []

CLIENT [] _____

****Mark the appropriate box with a tick mark****

BATCH NUMBERS	NUMBER OF BOXES	QUANTITY PER BOX	STOCK CODE	COMMENTS
				

069908476990

PRIONTEX		STERILISATION SERVICE				PRIONTEX	
DROP-OFF		PRE-STERILISATION		POST-STERILISATION		COLLECTION	
Representative Name		Representative Name		Representative Name		Representative Name	
Signature		Signature		Signature		Signature	
Date & Time		Date & Time		Date & Time		Date & Time	
Received goods in good order & condition from PP Despatch.		Received goods in good order & condition before sterilization.		Where any boxes damaged during the sterilisation process?		Received goods in good order & condition after sterilization.	
Address							
Tel No:							

PrionTex

Aregee Investments no 104 T/A Priontex
Corporate park north
313 Roan Crescent erf 394
Randjesfontein Midrand
Contact Dylan Hill email: dhili@priontex.com
Tel +27 11 237 5900 Fax +27 11 237 5912

PROFORMA INVOICE

Invoice No	0
Date	2017/11/06
Buyer's Reference	PO0000001159
Sales Order No	PO0000001159
Your Reference	

SHIP TO Dr Arthur Letele Medical Logistics Centre
16 Fabrica Road
Kimberly
8301
CONTACT Elmarie Delport
PHONE (053) 8302717
E mail: edelport@ncppg.gov.za

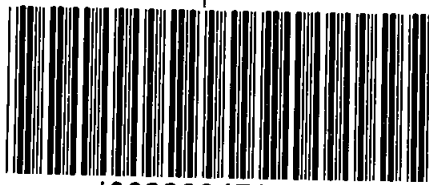
BUYER Dr Arthur Letele Medical Logistics Centre
16 Fabrica Road
Kimberly
8301

CONSIGNEE Dr Arthur Letele Medical Logistics Centre
16 Fabrica Road
Kimberly
8301
CONTACT Elmarie Delport
TEL (053) 8302717
E mail: edelport@ncppg.gov.za

Final Destination South Africa
Currency ZAR
Country of Origin South Africa

Transport Roadfreight
Place of loading 407 Roan Crescent Corporate park North
Place of discharge Kimberly
Payment Terms AS AGREED

Actual weight	1 824 00	KG	Volume	10 56	m ³
Volumetric Weight	10 56	KG	Total No Ctns	120	

ITEM CODE	DESCRIPTION	INVOICE QUANTITY	UNIT PRICE	AMOUNT
3 150 PRP-103H	3 150-PRP :03H MC KITS Surgica Trans 01	3600 0	R 110 44 R 0 00	R 397 584 00 R 0 00
 *069908476990*				

VALUE R 397 584 00
FREIGHT
VAT R 55 661 76
TOTAL R 453 245 76

DEPARTMENT OF HEALTH
DR. ARTHUR LETELE
MEDICAL LOGISTIC CENTRE

14 NOV 2017

16 FABRICIA ROAD
PRIVATE BAG X5049
KIMBERLEY 8300

CONTENTS NOT CHECKED

Signature



PACKING LIST

Arege Investments no 104 TIA Priontex
Corporate park north
313 Roan Crescent 194
Panglossfontein Merand
Contact Dylan H1 Email dhl@priontex.com
Tel +27 11 237 5900 Fax +27 11 237 5912

SHIP TO Dr Arthur Letele Medical Logistics Centre
16 Fabricia Road
Kimberly
8301

CONTACT PHONE Elmarie Deppor
053 5312717
E-mail: e.deppor@ncpp.gov.za

CONSIGNEE Department of Health Northern Cape
Dr Arthur Letele Medical Logistics Center
16 Fabricia Road
Kimberly
8301

CONTACT TEL Elmarie Deppor
053 5312717

Invoice No

Date 2017/11/06

Buyer's Reference PO0000001159

Sales Order No

Your Reference PO0000001159

BUYER Department of Health Northern Cape
Dr Arthur Letele Medical Logistics Center

Final Destination Dr Arthur Letele Medical Logistics Center
16 Fabricia Road
Kimberly

Country of Origin South Africa

Transport Roadfreight
Place of loading 407 Roan Crescent Corporate park North
Place of discharge Kimberly
Payment Terms AS AGREED

I D F

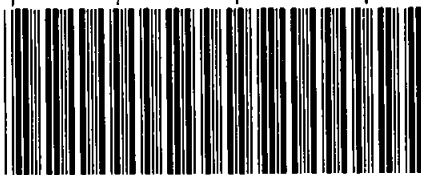
Customer Document Text

Country of final destination South AFRICA

Actual weight 1 824 00 KG Volume 10 56 m³

Volumetric Weight 10 56 KG Total No Ctns 120 00

QTY	Product Description	CARTON WEIGHT	No OF CTNS	BATCH	EXPIRY DATE	MEASUREMENTS				TOTAL WEIGHT
						L	B	H	VOL	
3600	3 150 PRP 103H MC HTS Surgical	15 20	120	000028000622	Oct 19	55	40	40	10 560	1824
3600			120						10 560	1824



069908476990

DEPARTMENT OF HEALTH
DR. ARTHUR LETELE
MEDICAL LOGISTIC CENTRE

14 NOV 2017

16 FABRICIA ROAD
PRIVATE BAG X5049
KIMBERLEY 8300

CONTENTS NOT CHECKED

Signature

Priontex

Priontex Micronclean Gauteng (Pty) Ltd

Corporate Park North 313 Poan Crescent Erf
493 Pandjerspart Ext 121 Off P101 Old Pretoria

VAT No 4020241551
Reg No 2003/001557/07
Tel +27 11 237 5900
Fax +27 11 237 5912
www.priontex.com info@priontex.com

CUSTOMER NAME

Northern Cape Province Health Department
Dr Arthur Letele Led Log
16 Fabricia Road
Fabricia
8301
VAT No GOVERNMENT

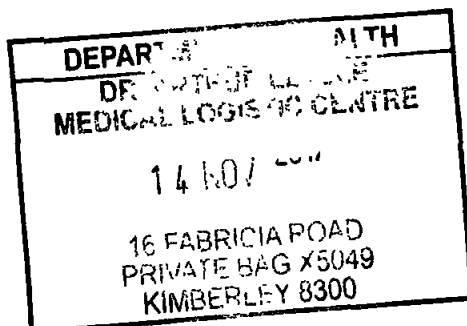
DELIVERY ADDRESS

Dr Arthur Letele's Led Log
16 Fabricia Road
Fabricia
Kimberly
8301

Tax Invoice

Invoice Number PMCGINV350711
Priontex Order No PMCGSC131099
Customer Order No PO0000001159
Date 2017/11/07
Account NOP001
Page 1 of 1

Code	Description	Quantity	Units	Net Sell Excl	Tax	Total Price
150-PRP-103H	General Kit Forceps Guided -Type 10H	3 600 00	Each	110 44	55 661 76	397 584 00
Batch No Carbons	000026000022 120	Exp Date - 10/19				
Total Qty		3 600 00				



CONTENTS NOT CHECKED

Signature



069908476990

Total (Excl) 397 584 00
VAT 55 661 76
Total (Incl) R 453.245 76

Kindly use Account Number as
reference when making deposits. If cash
sale use PMCGINV number

Banking Details
Priontex Micronclean Gauteng (Pty) Ltd
NEDBANK LTD
Branch Code 198765
Acc Number 1018130071

Goods supplied are subject to the standard terms and
conditions and will remain the property of Priontex
Micronclean Gauteng (Pty) Ltd until paid for in full

Received in good order

Signature

Date 14/11/17

B-BBEE Level 4 Supplier (100% procurement recognition)

2017/11/07 11:09:12 AM