

# CARGOWORKS

CO. REG. No. 2012/075135/07

VAT REG NO. 4430138760

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☎ (013) 758-2067  
FAX (013) 758-2058

EAST LONDON  
☎ (043) 736-6077  
FAX (043) 736-1424

## PROOF OF DELIVERY

DATE 10/22/17 ORIGIN JHB DEST. P. E. LINEHAUL VEHICLE \_\_\_\_\_ WAYSBILL NO. 2960690

FOR ACCOUNT OF: (POSTAL ADDRESS) \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

SENDER'S NAME AND ADDRESS <u>DM SOLUTIONS (JHB)</u> <u>7 DEWANI STREET</u> <u>BRASSIAE EXT 18</u>		RECEIVER'S NAME AND ADDRESS <u>DM SOLUTIONS (P.E.)</u> <u>75 2<sup>ND</sup> AVE.</u> <u>NEWTONS PARK P.O.</u>	
SENDER'S NAME: <u>DM SOLUTIONS</u> PHONE: <u>531-5491</u>		CONTACT NAME: <u>MALCOLM</u> PHONE: <u>083 691 1452</u>	

NO INSURANCE IS PROVIDED. PLEASE ENSURE THAT GOODS ARE ADEQUATELY INSURED.  
NO DELIVERIES OR COLLECTIONS TO RESIDENTIAL AREAS OR CHAINSTORES.

QTY PACKS	PACKAGING	CONTENTS	DIMENSIONS (CM)			VOLUME WEIGHT	ACTUAL MASS KG
			L	B	H		
1	WRAPPED	RL 2020 B/M	80	50	153		9 kg
1	WRAPPED	DM - HORIZONTAL	160	60	2		480 kg

SPECIAL INSTRUCTIONS: \_\_\_\_\_ CHARGEABLE WEIGHT \_\_\_\_\_

SENDER <u>[Signature]</u> SIGNATURE	COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <u>[Signature]</u> SIGNATURE	DELIVERED BY <u>[Signature]</u> SIGNATURE	RECIPIENT <u>[Signature]</u> SIGNATURE	FOR OFFICE USE ONLY	
PRINT NAME: <u>[Name]</u>	PRINT NAME: <u>[Name]</u>	PRINT NAME: <u>[Name]</u>	PRINT NAME: <u>[Name]</u>	RATE	
DATE: <u>10/22/17</u>	DATE: <u>10/22/17</u>	DATE: <u>10/22/17</u>	DATE: <u>10/22/17</u>	CHARGE	
TIME:	TIME:	TIME:	TIME:	BLURCHARGE	
				DOCUMENT FEE	
				V.A.T	
				TOTAL	

PLEASE USE BALLPOINT PEN AND PRESS HARD

By your signature, you confirm that you have read the Conditions of Consignment on the back of this document and that you agree to be bound by all the Conditions.