

**Port Elizabeth**  
Unit 10, Aldo Business Park  
Gate 2, Greenbushes Industrial Park  
Old Cape Road, Greenbushes  
Tel: +27 41 372 1193



EMIT 325470

ACCOUNT NUMBER	CLIENT REFERENCE	OFFICE REFERENCE	DATE
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SENDER (Your Name) NGELE MIZINGA		TEL 011 2378900		RECEIVER (Name) TB / HIV care association			
COMPANY (Name) Priortec Midrandean Gauteng				COMPANY (Name)			
STREET ADDRESS 407 Roan Crescent (Dept./Floor) Corporate Park North				STREET ADDRESS 25 St George's Road (Dept./Floor) Absa House 8th Floor			
Randjespark ext 121		POSTAL CODE		CAPE TOWN		POSTAL CODE 8001	
CITY JHB		SUBURB Midrand		CITY CPT		SUBURB CPT	
NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
53	Preper - Removal kits	40	40	55		499kg	
TEST WEIGHT (OFFICE USE)						499kg	COLLECTED BY:  SIGNATURE: [Signature] DATE: 12/19/ TIME:

SERVICES PLEASE SELECT SERVICE / IN BOX									
DOOR TO DOOR ECONOMY	<input 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	OUR SIGNATURE ACKNOWLEDGES WE HAVE SEEN AND UNDERSTOOD AND AGREE TO BE BOUND BY TERMS AND CONDITIONS OF CARRIAGE (SEE REVERSE)					
CHECKED IN	MICHAEL	13/09/16	<i>[Signature]</i>	SENDER'S SIGNATURE: <i>[Signature]</i> DATE: 13/09/16					
CHECKED OUT				PRINT NAME: <i>[Signature]</i> TIME: _____					
CHECKED IN				PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION					
CHECKED OUT				RECEIVER'S SIGNATURE: <i>[Signature]</i> DATE: 15/09/2016					
				PRINT NAME: <i>[Signature]</i> TIME: 08:45					

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.

Uniprint-F 031 560 2300 07/2013