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EMIT 350185



ACCOUNT NUMBER PMD001		CLIENT REFERENCE 003 + Butcher Block		OFFICE REFERENCE 003 + Butcher Block		DATE	
SENDER (Your Name) LE CREUSET HQ SA		TEL		RECEIVER (Name) TONI		012 004 005	
COMPANY (Name) LE CREUSET HQ SA		COMPANY (Name) LE CREUSET NEWLYN		STREET ADDRESS (Dept./Floor) UNIT 3 HERON PARK		STREET ADDRESS (Dept./Floor) SHOP 12 NEWLYN MAINE	
STREET ADDRESS (Dept./Floor) OLIVE GROVE ESTATE		POSTAL CODE		JANUARY MASILELA AMBRAND AVE		POSTAL CODE	
CITY OLD PAARDEVLEI		SUBURB 7130		CITY WATERKLOOF EXT 2		SUBURB	
NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTION
1	Butcher Block	35	35	93		25	✓
2	BOXES	48	48	36		38	
							COLLECTED BY: 2/R SIGNATURE: CHRIS DATE: 3/10/16 TIME: 1:10
TEST WEIGHT (OFFICE USE)					63kg		
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	JUTHA	03/10/16	[Signature]	SENDER'S SIGNATURE: [Signature] DATE: 3-10-16			
CHECKED OUT	Emma	03/10/16	[Signature]	PRINT NAME: MARK CHITAU TIME:			
CHECKED IN				PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION			
CHECKED OUT				RECEIVER'S SIGNATURE: [Signature] DATE: 3-10-16			
				PRINT NAME: Emma TIME: 1:10			

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 2800 07/2013