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EMIT 321489

ACCOUNT NUMBER H00001	CLIENT REFERENCE 752-Stat	OFFICE REFERENCE 752-Stat	DATE
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SENDER (Your Name)		TEL 021 651 7178		RECEIVER (Name)			
COMPANY (Name) LE CREUSET SUMERSET WEST				COMPANY (Name) LE CREUSET BROOKLYN			
STREET ADDRESS (Dept./Floor) UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL ES				STREET ADDRESS (Dept./Floor) SHOP 318 BROOKLYN MALL			
OLD PARADEWIE ROAD		POSTAL CODE		ENR VEALE WATERKLOOF ROAD		POSTAL CODE	
CITY SUMERSET WEST		SUBURB 7130		CITY BROOKLYN		SUBURB	
NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
4	BOXES	46	46	52		101	
2	BOXES	62	42	38		72	
1	BOXES	50	48	34		12	
TEST WEIGHT (OFFICE USE)						45kg	COLLECTED BY: ZAR SIGNATURE CHRIS DATE: 3/10/16 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	John	03/10/16	[Signature]	SENDER'S SIGNATURE: [Signature] DATE: 3/10/16
CHECKED OUT	Gavin	03/10/2016	[Signature]	PRINT NAME: MARSHALL TIME: 2:26 pm
CHECKED IN				PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION
CHECKED OUT				RECEIVER'S SIGNATURE: [Signature] DATE: 07/10/16
				PRINT NAME: Moya 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.

Uniprint-F 031 560 2300 07/2013

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