



RB & SON

TRANSPORT

WAREHOUSING AND TRANSPORT

CAPE TOWN
14 Killamey Avenue
Killamey Gardens
Tel: (021) 557 5112
Cell: 082 458 2108
E-Mail: reception@rbsoncape.co.za

PORT ELIZABETH
17B Kurland Road,
Perseverance,
Port Elizabeth
Tel: (021) 557 5112
Option 4

JOHANNESBURG
5 Megawatt Road,
Aeroporto, Spartan
Tel: (011) 974 5984
Fax: (011) 974 9691

DURBAN
Unit C, 100 Richard Carte Road
Jacobs 4092
Tel: (031) 940 4110
Fax: (031) 462 0513

PROOF OF DELIVERY

DATE	17/09/21	ORIGIN	DESTINATION	WAYBILL NO. CT 130509
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FOR ACCOUNT OF: (Postal Address:)	<input type="checkbox"/> ENVELOPE ATT <input type="checkbox"/> C.O.A. ATT <input type="checkbox"/> TREM CARD ATT	<input type="checkbox"/> ACCOUNT <input type="checkbox"/> PRE-PAID <input type="checkbox"/> C.O.D.	<input type="checkbox"/> DEPOT TO DEPOT <input type="checkbox"/> DOOR TO DOOR <input type="checkbox"/> DEPOT TO DOOR
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SENDERS NAME AND ADDRESS: HENEWAYS Logistics ELLING II S Fitzmaurice ELLING II	RECEIVERS NAME AND ADDRESS: BRENNAG S.A Killarney Gardens
SENDERS REFERENCE:	CUSTOMER REFERENCE:

QTY	PACKAGING/ PACK SIZE	CONTENTS	DIMENSIONS IN CM	ACTUAL WEIGHT	CHARGEABLE WEIGHT	RATE/KG	R C	
200	25	BORAX DECA GL (Bags)						
CA 88 99 06								
							CHARGE	
							OUTLYING AREAS	
							DOCUMENT FEE	
							V.A.T.	
							TOTAL	

The transporter or his agent is not responsible for shortages or damages to inner contents to parcel / pallets. Attached documents will not be returned unless otherwise indicated by checking the box.	CLOSED VEHICLE ONLY <input type="checkbox"/>	SIGN AND RETURN ATTACHED DOCUMENT <input type="checkbox"/>
"All business undertaken is subject to our standard terms and conditions, a copy of which is set out on the reverse side hereof"...	Signature/Initials: _____	

Goods Despatched as Stated 17/09/21 Sender's Authorised Signature/Date	Received by Consignee or his Agent in Good Order & Condition Print Name: <u>Antony</u> Company Stamp/Date/Time: <u>17-09-2021</u>	TOTAL LOOSE ITEMS:	TOTAL PALLETS: 4	GROSS WEIGHT:						
LEG	REC. NAME OF DRIVE/ ST/MAN	SIGN	DATE	TIME	DATE	LEG	REC. NAME OF DRIVE/ ST/MAN	SIGN	DATE	SHORT OVER
1	Wiser					3				
2						4				



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1	WISER					3				
2						4				