



VAT REG. NO. 4510265798  
 REG. NO. 2011/010443/07

File No.	Origin	Date	Destination
Shipper's Account Number <b>J17991</b>	Shipper's Reference Number <b>11972270FM</b>	To: (Recipients Name) <b>Prisha Pillay</b>	Their Phone Number: <b>011 7077586</b>
Shipper: (Your Name): <b>CANDICE MURISON</b>	Your Phone Number: <b>0215070410</b>	Company Name: <b>AVI</b>	Street Address: (PO. Boxes are not deliverable) Dept/Floor <b>30 Sloane Street</b>
Company Name: <b>AVI FIELD MARKETING</b>	Street Address: (Dept/Floor) <b>12 EVANS AVENUE</b>	City: <b>EPPINDIUST</b>	Postal Code: <b>7460</b>
City: <b>EPPINDIUST</b>	Postal Code: <b>7460</b>	Country:	Country:

**SPECIAL INSTRUCTIONS / ADDITIONAL SERVICES (PLEASE SPECIFY)**

<b>INTERNATIONAL - BUDGET FREIGHT SERVICES (ONLY FOR THE FOLLOWING DESTINATIONS)</b>	Customs Value	Insurance Value
BOTSWANA <input type="checkbox"/> LESOTHO <input type="checkbox"/> SWAZILAND <input type="checkbox"/> MOZAMBIQUE <input type="checkbox"/> NAMIBIA <input type="checkbox"/>		
<b>INTERNATIONAL SERVICES</b>	<b>DOMESTIC SERVICES</b>	
COURIER DOCUMENT EXPRESS <input type="checkbox"/> REMAIL <input type="checkbox"/> COURIER PARCEL EXPRESS <input type="checkbox"/> AIRFREIGHT <input type="checkbox"/>	OVERNIGHT EXPRESS BY 10H30 <input checked="" type="checkbox"/> OVERNIGHT BY 13H00 <input type="checkbox"/>	BUDGET CARGO <input type="checkbox"/> SAME DAY EXPRESS <input type="checkbox"/>

NO. OF PKGS	DESCRIPTION OF PACKAGING AND CONTENTS	DIMENSIONS (CENTIMETRES)			VOL WEIGHT Kg's	ACTUAL WEIGHT Kg's	FREIGHT CHARGE	FUEL SURCHARGE	OTHER	INSURANCE	SAME DAY SURCHARGE	TOTAL EXCL. VAT	VAT
		LENGTH	BREATH	HEIGHT									
	4 Boxes Received - Delivery Room National Brands Limited 30 Sloane Street Bryanston Date: 2022-06-22 Michael												

HAZARDOUS CARGO? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	SATURDAY DELIVERY FOR DOMESTIC SERVICES ONLY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	INSURANCE REQUIRED ABOVE R1000? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DELIVERY BY 8:30 <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TOTAL INCL. VAT <b>R</b>
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WE HAVE SEEN AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE OF SKYNET WORLDWIDE EXPRESS SIGNATURE: <i>C. Murison</i> PRINT NAME: <b>C. Murison</b>	RECEIVED BY SKYNET WORLDWIDE EXPRESS SIGNATURE: <i>[Signature]</i> DATE: <b>20/06/22</b> TIME: <b>5:50</b>	RECEIVED BY INVOICE ORDER AND CONDITION CONSIGNEE SIGNATURE: <i>[Signature]</i> PRINT NAME: <b>Michael</b> DATE: <b>22/06/22</b> TIME: <b>5:50</b>
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**PARCEL STICKERS**

**P.O.D. - DEST. COPY**

\*UNLESS INDICATED ON THE FACE HEREOF, SKYNET WORLDWIDE EXPRESS RESERVES THE RIGHT TO DISPATCH AND CHARGE AT THE PUBLISHED DOMESTIC BUDGET CARGO TARIFF\*

PLEASE COMPLETE ALL SHADED AREAS AS INDICATED IN RED