

CARGOWORKS

CO. REG. No. 2012/075135/07

VAT REG NO. 4430138760

P.O. BOX 8876, EDENGLLEN 1610
www.cargoworks.co.za

JOHANNESBURG
☎ (011) 873-1212
FAX (011) 873-0715

PORT ELIZABETH
☎ (041) 486-1092
FAX (041) 486-1096

CAPE TOWN
☎ (021) 934-8040
FAX (021) 934-8030

NELSPRUIT
☎ (013) 758-2067
FAX (013) 758-2068

DURBAN
☎ (031) 702-0252
FAX (031) 702-6218

EAST LONDON
☎ (043) 736 6077
FAX (043) 736-1424

PROOF OF DELIVERY

DATE <u>07/10/19</u>	ORIGIN <u>JHB</u>	DEST. <u>CPT</u>	LINEHAUL VEHICLE	WAYBILL NO. <u>3341674</u>
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FOR ACCOUNT OF: (POSTAL ADDRESS)	ACCOUNT NO.
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SENDER'S NAME AND ADDRESS <u>ARM SOLUTIONS (JHB)</u>		RECEIVERS NAME AND ADDRESS <u>ARM SOLUTIONS (CPT)</u>	
<u>7 ALEXANDER STREET</u>		<u>110 HARBORVIEW BUS. PARK</u>	
<u>WATSONS CANT. 18</u>		<u>WATSONS CANT. 18</u>	
SENDER'S NAME: <u>ARM SOLUTIONS</u> PHONE: <u>531-5491</u>		CONTACT NAME: <u>ARM SOLUTIONS</u> PHONE: <u>083-600 5700</u>	

NO INSURANCE IS PROVIDED. PLEASE ENSURE THAT GOODS ARE ADEQUATELY INSURED.
NO DELIVERIES OR COLLECTIONS TO RESIDENTIAL AREAS OR CHAINSTORES.

QTY PACKS	PACKAGING	CONTENTS	DIMENSIONS (CM)			VOLUME WEIGHT	ACTUAL MASS KG
			L	B	H		
<u>1</u>	<u>WAGONS</u>	<u>00-5515 5147096</u>	<u>205</u>	<u>99</u>	<u>59</u>		<u>120kg</u>

SPECIAL INSTRUCTIONS:

CHARGEABLE WEIGHT

SENDER SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>ARM SOLUTIONS</u> DATE: <u>07/10/19</u> TIME: <u>14:27</u>	COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>ARM SOLUTIONS</u> DATE: <u>07/10/19</u> TIME: <u>14:27</u>	DELIVERED BY SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>ARM SOLUTIONS</u> DATE: <u>11/10/19</u> TIME: <u>14:27</u>	RECIPIENT SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>ARM SOLUTIONS</u> DATE: <u>11/10/19</u> TIME: <u>14:27</u>	FOR OFFICE USE ONLY <table border="1"> <tr> <td>RATE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CHARGE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>SURCHARGE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>DOCUMENT FEE</td> <td></td> <td></td> <td></td> </tr> <tr> <td>V.A.T</td> <td></td> <td></td> <td></td> </tr> <tr> <td>TOTAL</td> <td></td> <td></td> <td></td> </tr> </table>	RATE				CHARGE				SURCHARGE				DOCUMENT FEE				V.A.T				TOTAL			
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By your signature, you confirm that you have read the Conditions of Consignment on the back of this document and that you agree to be bound by all the Conditions.

PLEASE USE BALLPOINT PEN AND PRESS HARD