

CARGOWORKS

(CO. REG. No. 2012/075135/07

VAT REG NO. 4430139760

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

JOHANNESBURG
☎ (011) 476-1212
FAX (011) 473-0715

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

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

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

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

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

PROOF OF DELIVERY

BIL

DATE <u>22/08/16</u>	ORIGIN <u>JHB</u>	DEST. <u>E.L</u>	LINEHAUL VEHICLE <u>H23</u>	WAYBILL NO. <u>2892699</u>
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FOR ACCOUNT OF: (POSTAL ADDRESS)	ACCOUNT NO. <u>889001</u>
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SENDER'S NAME AND ADDRESS <u>PRION TEX JHB</u>		RECEIVER'S NAME AND ADDRESS <u>ST DOMINIC'S</u>	
<u>313 RUAN CRESCENT</u>		<u>47 Summit Road, Beacon Bay</u>	
<u>EDENGLLEN</u>		<u>East London</u>	
POSTAL CODE:		POSTAL CODE:	
SENDER'S NAME: <u>Sam</u>	PHONE: <u>011 273 9900</u>	CONTACT NAME: <u>Debbie</u>	PHONE: <u>082 343 8516</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
			B	H			
<u>2</u>	<u>BOXES</u>	<u>BOXES</u>	<u>45</u>	<u>45</u>	<u>50</u>		<u>46KG</u>
<u>1</u>	<u>WRAPPED</u>	<u>WRAPPED BOXES ONLY</u>	<u>90</u>	<u>40</u>	<u>97</u>		<u>38KG</u>
		<u>DEL NOTE!</u>					
		<u>39831-0</u>					

SPECIAL INSTRUCTIONS:

CHARGEABLE WEIGHT

SENDER SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>Sam</u> DATE: <u>22/08/16</u> TIME: <u></u>	COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>Wellington</u> DATE: <u>22/08/2016</u> TIME: <u></u>	DELIVERED BY SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>Anslin</u> DATE: <u>24/08/16</u> TIME: <u>10:10</u>	RECIPIENT SIGNATURE: <u>[Signature]</u> PRINT NAME: <u>CYNTHIA</u> DATE: <u>24/08/16</u> TIME: <u>18:25</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