



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

PROOF OF DELIVERY

DATE	ORIGIN	DESTINATION	WAYBILL NO. CT 124176
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FOR ACCOUNT OF: (Postal Address:)	<input type="checkbox"/> ENVELOPE ATT	<input type="checkbox"/> ACCOUNT	<input type="checkbox"/> DEPOT TO DEPOT
	<input type="checkbox"/> C.O.A. ATT	<input type="checkbox"/> PRE-PAID	<input type="checkbox"/> DOOR TO DOOR
	<input type="checkbox"/> TREM CARD ATT	<input type="checkbox"/> C.O.D.	<input type="checkbox"/> DEPOT TO DOOR

SENDERS NAME AND ADDRESS:	RECEIVERS NAME AND ADDRESS:
BRENTAG S. A	KYRON LABORATOR
11 MANSELL ROAD	KPH 29 BARNEY ROAD PENRSE
KILLARNEY GARDENS	JOHANNESBURG
SENDERS REFERENCE:	CUSTOMER REFERENCE:

QTY	PACKAGING/ PACK SIZE	CONTENTS	DIMENSIONS IN CM	ACTUAL WEIGHT	CHARGEABLE WEIGHT	RATE/KG	R	C
2		BOXES			52,0	Kc		
		83432156						
		PED= 2 x 25kg						
							CHARGE	
							OUTLYING AREAS	
							DOCUMENT FEE	
							V.A.T.	
						53kg	TOTAL	53

**SIGN AND RETURN
ATTACHED DOCUMENT**

Signature/Initials:

Goods Despatched as Stated			Received by Consignee or his Agent in Good Order & Condition			TOTAL LOOSE ITEMS:				
 Sender's Authorised Signature/Date			Print Name: <u>W. S. L. S. Co</u>  Company Stamp/Date/Time			TOTAL PALLETS:				
						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	Wando Mutual					3				
2						4				