Special Instructions:

Service:

ЕСФ

Sender remails liable for all charges if not settled by the nominated party within 30 days.

This shipment is accepted by UTITM subject to the conditions as agreed and acknowledged on the credit application

DELIVERY NOTE



P.O.D. COPY

Dispatched on 17 August 2018





EECS10292734

SHIPMENT DETAILS

LE CREUSET From: Contact: MARY 0213001779 Phone:

To: MAREE-LOUISE VENTER-SCHOEMAN

BARBERTON DISTRICT HOSPITAL PHYSIO DEPARTMENT 1 HOSPITAL STREET

BARBERTON, 1300 BARBERTON

Contact: MAREE-LOUISE VENTER-S 0722923411

Phone:

Origin Code: SSW Destination Code: BNR Service:

Liability Value: R0 Incidental Liability R Analysis Code:

Contents Account No:

027877 LE CREUSET Account Name:

No. of Parcels:

Total Mass: References:

160461,

Account Holder:

Total Volume:

19683

17/65/2018 Le Creuset From

MAREE – LOUISE VENTER – SCHOEMAN BARBERTON DISTRICT HOSPITAL PHYSIO DEPARTMENT Ta

1 HOSPITAL Street BARBERTON BARBERTON 1300 **SOUTH AFRICA**

Contact MAREE-LOUISE VENTER-SCHOEMAN

Phone Ref

0722823411 160461, 20A33588 LEECT10298242

SHIPMENT: LEECS10292734

PARCEL MASS: 4.00

HUB: SUNNLP TOWN: BNR ZONE:

Received by Consignee:

M. Venter-Schoaman

Signature:

Date: 21:08:20(8Time: 10:05am)

Company Stamp or Endorsements: