Special Instructions:

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 04 September 2018

To



**Destination Code:** 

Service:

CPT

ONX

LEECS10298619

SHIPMENT DETAILS

From:

LE CREUSET

Contact: MARY

0213001779 Phone:

To: TRACEY JENKINSON REGUS OFFICES

LIESBEEK HOUSE RIVER PARK

0 GLOUCESTER ROAD

MOWBRAY, 7700 CAPE TOWN SOUTH AFRICA

Contact: TRACEY JENKINSON

Phone: 0716866747

Origin Code:

SSW Destination Code: CPT

Service:

Liability Value: R<sub>0</sub> Incidental Liability R

Analysis Code:

Contents

Account No:

Account Name:

No. of Parcels:

Total Mass:

References:

LE CREUSET

027877

Total Volume:

Account Holder: S

6800

161237, 2OA34225

161237, 2OA34225,

04/09/2018

From Le Creuset

TRACEY JENKINSON

**REGUS OFFICES** LIESBEEK HOUSE RIVER PARK

**O GLOUCESTER Road** MOWBRAY

**CAPE TOWN 7700** SOUTH AFRICA

Contact TRACEY JENKINSON

0716866747 Phone

Ref

161237, 20A34225

LEECT10304347

SHIPMENT: LEECS10298619

PARCEL MASS: 2.00

**HUB: SUNCPT** TOWN: CPT ZONE:

Parcel 1 of 1

Received by Consignee:

Print Name: FONWOOCK

Signature:

Company Stamp or Endorsements:

Date: