

Special Instructions:

WHEN YOU ARRIVE AT THE CLINIC PLS GIVE ME A CALL ON 0832871323. IF I DONT ANSWER

Sender remains liable for all charges if not settled by the nominated party within 30 days.
This shipment is accepted by UTIM subject to the conditions as agreed and acknowledged on the credit application

DELIVERY NOTE



P.O.D. COPY

Dispatched on 18 September 2018

161858



LEECS10303059

SHIPMENT DETAILS From: LE CREUSET Contact: MARY Phone: 0213001779		20A34731, 161858.	From: 18/09/2018 Le Creuset To: JANA RUST PARK STREET CLINIC 0 DESMOND TUTU DRIVE Street KLERKSDORP 2571 SOUTH AFRICA	LEECT10308814 SHIPMENT: LEECS10303059 PARCEL MASS: 7.08
To: JANA RUST PARK STREET CLINIC 0 DESMOND TUTU DRIVE STREET KLERKSDORP, 2571 KLERKSDORP Contact: JANA RUST Phone: 0832871323			Contact: JANA RUST Phone: 0832871323 Ref: 20A34731, 161858	<div style="border: 1px solid black; padding: 5px; text-align: center;"> ECO HUB: SUNKPR TOWN: KPR ZONE: </div> Parcel 1 of 1
Origin Code: SSW Destination Code: KPR Service: 6 Liability Value: R0 Incidental Liability R Analysis Code: — Contents — Account No: 027877 Account Holder: S Account Name: LE CREUSET No. of Parcels: 1 Total Mass: 7 Total Volume: 33075 References: 20A34731, 161858			Received by Consignee: Print Name: <i>Jana Rust</i> Signature: <i>[Signature]</i> Date: <i>20/9/18</i> Time: <i>13:10</i>	Company Stamp or Endorsements:

