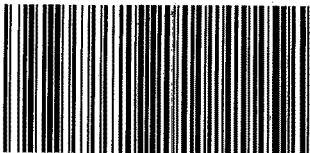


CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
 t/a DSV Distribution
 PO Box 63, The Reeds 0061
 Tel (012) 673-2000
 Reg. No. 2000/016342/07
 VAT No. 4880169685



SUBBD27219365

2 2 2 E E E 2 2 2

Sender's Details

Company Name: LE CREUSET WATERFALL

Street Address: SHOP 101
1 MURABIE AVENUE
CATHAN EXT 12

Suburb: WATERFALL FALL

City / Town: RUSTENBURG Postal Code: 0299

Contact: MANAGER: LERATO

Phone: 011

Consignee's Details. Full Street Address Please

Company Name: LE CREUSET WATERFALL

Street Address: 103 Walmer park shopping
COMPLE BTWIN 14TH AND 16TH
AVENUE, MAIN ROAD

Suburb: WALMER

City / Town: DORT ELIZABETH Postal Code: 6070

Contact: MANAGER: RENE

Phone: 041 367 2312

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLMS Customs Tariff

Destination Country: South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)

Sender's Reference: CLASSIC SALT MILLS X2 (M/T) (U) Analysis Code:

SPECIAL INSTRUCTIONS

Bill Charges To Account No: U27766 Bill To Sender Consignee Other (Name Please)

Consignee Or Other (Third Party) is Billed, Sender Remains Liable For Unpaid Charges.

IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.14 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 14.5 OVERLEAF). IF YOU WISH DSV DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 14.5, 14.6 AND 14.7 OVERLEAF).

D. Hume SENDER'S AUTHORISED SIGNATURE DATE: 04-06-18

e-mail / Fax / Proof of Delivery e-mail Address / Fax Number

Total Parcels

NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<u>1</u>	<u>30</u>	<u>20</u>	<u>1</u>

1. ONLINE

3. EFT

Total Mass (Kg) 1

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): SHI REEN

Date Received: 080618 Time Received: 1031

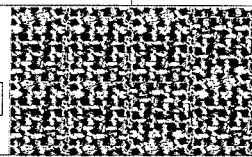
Signature: [Signature]

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): Hesele

Date Received: 040618 Time Received: 1215

Signature: [Signature]



POD COPY

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