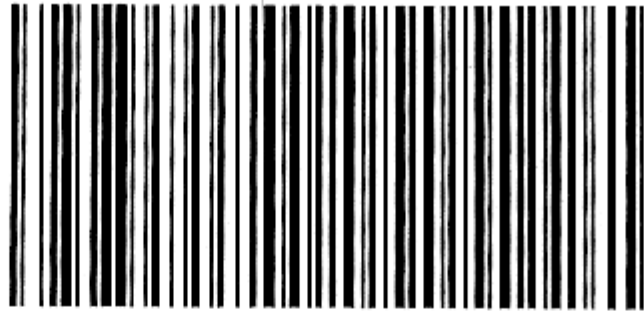


CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
 1/a DSV Distribution
 PO Box 63, The Reeds 0061
 Tel (012) 673 2000
 Reg. No. 2000/016342/07
 VAT. No. 4880189585



SUBBD29242413

2 2 2 E E E 2 2 2

Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name ATM SOLUTIONS				Company Name ATM SOLUTIONS UMTATA				<input type="checkbox"/> Same Day	
Street Address 7 DELPHI STREET				Street Address 13 MAPHUZI CRESCENT SIDWADWA VIEW				<input type="checkbox"/> Express	
Suburb SANDTON				Suburb 				<input type="checkbox"/> With Sunrise Option	
City / Town JNB		Postal Code 2196		City / Town MIHATHA (UMTATA) (UTC)		Postal Code 		<input type="checkbox"/> With Saturday Service	
Contact MORATUWA				Contact SONWABO				<input type="checkbox"/> Public Holiday Service	
Phone 011 555 5500				Phone 083 653 4758				<input checked="" type="checkbox"/> Economy	
Destination Country <input checked="" type="checkbox"/> South Africa		<input type="checkbox"/> Botswana		<input type="checkbox"/> Lesotho		<input type="checkbox"/> Namibia		<input type="checkbox"/> Swaziland	
<input type="checkbox"/> Other (Please Specify)		<input type="checkbox"/> Other (Please Specify)		<input type="checkbox"/> Other (Please Specify)		<input type="checkbox"/> Other (Please Specify)		<input type="checkbox"/> After Hours	
Sender's Reference 				Analysis Code 				<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS									
Tariff Code 027766		Bill To Sender <input checked="" type="checkbox"/>		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		1. ONLINE <input type="checkbox"/>	
If 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 1000.00 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)									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number 					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
1		 		 		 		 	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) SONWABO					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) MIKOSI				
Date Received: 270619		Time Received: 0912			Date Received: 250619		Time Received: 1022		
Signature: [Signature]					Signature: [Signature]				

POD COPY

Version Control (01/2018)