

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. 4880189685



SUBBD30074198

2 2 2 E E E 2 2 2

Segikile Clinic

Sender's Details

Consignee's Details. Full Street Address Please

Company Name *DSV Distribution RT.R*
Street Address
Gnr Sigma 2 korokoro str
Suburb *Waterfall East*
City / Town Postal Code
Contact *P. Mungakem*
Phone *014 940 5504*

Company Name *DSV Healthcare Meadowview*
Street Address
1 Meadowview Lane
Meadowview Business Estate
Suburb *Limbra Park*
City / Town Postal Code
Contact
Phone *Xolani Luthelo 010 248 0196*

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

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

Sender's Reference *SCRIPT-1798612* Analysis Code

SPECIAL INSTRUCTIONS

Tariff Code *008156* Bill To Sender Consignee Other (Name Please)

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)

J.E. *11/12/2018*

SENDER'S AUTHORISED SIGNATURE DATE

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

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	Total Mass (Kg)
<i>1 Pack</i>	<i>18 scripts</i>	<i>30</i>	<i>20</i>	<i>1</i>	<i>1 Kg</i>

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY) *MPho*

Date Received: *10 21 2018* Time Received: *1539*

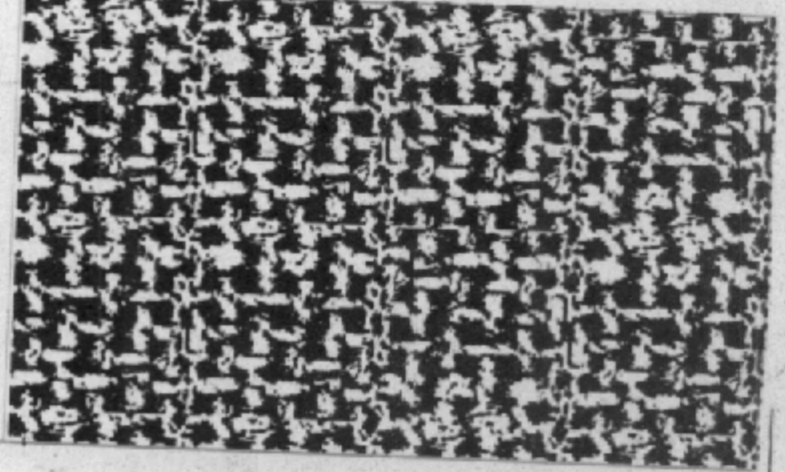
Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY) *ITS MOKENG*

Date Received: *10 21 2018* Time Received: *1730*

Signature: *J.E.*



POD COPY

Version Control (01/2018)