

CARGOWORKS

CO. REG. No. 2012/075135/07

VAT REG NO. 4430138760

P.O. BOX 8876, EDENGLLEN 1610
www.cargoworks.co.za

JOHANNESBURG
☎ (011) 873-1212
FAX (011) 873-0715

PORT ELIZABETH
☎ (041) 486-1092
FAX (041) 486-1096

CAPE TOWN
☎ (021) 934-8040
FAX (021) 934-8030

NELSPRUIT
☎ (013) 758-2067
FAX (013) 758-2068

DURBAN
☎ (031) 702-0252
FAX (031) 702-6218

EAST LONDON
☎ (043) 736 8077
FAX (043) 736-1424

PROOF OF DELIVERY

DATE: 26/09/18 ORIGIN: JMD DEST: CPT LINEHAUL VEHICLE: 139BL WAYBILL NO. 3219234

FOR ACCOUNT OF:
(POSTAL ADDRESS)

ACCOUNT NO.

SENDERS NAME AND ADDRESS

ATM 2000 (JMD)
7 AUBURN STREET
EDENGLLEN EXT. 18

RECEIVERS NAME AND ADDRESS

ATM 2000 (CPT)
113 WATERLOO BUS. PARK
WINCHESTER ROAD

POSTAL CODE:

SENDERS NAME:

PHONE:

2000 531-5491

CONTACT NAME:

PHONE:

2000 083 602 5980

NO INSURANCE IS PROVIDED. PLEASE ENSURE THAT GOODS ARE ADEQUATELY INSURED.
NO DELIVERIES OR COLLECTIONS TO RESIDENTIAL AREAS OR CHAINSTORES.

QTY PACKS	PACKAGING	CONTENTS	DIMENSIONS (CM) L B H	VOLUME WEIGHT	ACTUAL MASS KG
1	2000	BL 2000 P/M 2100	220 115 80		1230
2	2000	BL 2000 P/M	248 80 155	-1 ATM	
				11-09-18	
				-1 ATM	
				12-09-18	

SPECIAL INSTRUCTIONS:

CHARGEABLE
WEIGHT

SENDER SIGNATURE: <i>[Signature]</i> PRINT NAME: <i>[Name]</i> DATE: <i>26/09/18</i> TIME: <i>17:00</i>		COLLECTED BY Goods correctly packed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO SIGNATURE: <i>[Signature]</i> PRINT NAME: <i>[Name]</i> DATE: <i>26/09/18</i> TIME: <i>17:00</i>		DELIVERED BY SIGNATURE: <i>[Signature]</i> PRINT NAME: <i>[Name]</i> DATE: <i>17-09-18</i> TIME: <i>17:00</i>		RECIPIENT SIGNATURE: <i>[Signature]</i> PRINT NAME: <i>[Name]</i> DATE: <i>17-09-18</i> TIME: <i>17:00</i>		FOR OFFICE USE ONLY <table border="1"> <tr> <th>RATE</th><th></th><th></th><th></th></tr> <tr> <td>CHARGE</td><td></td><td></td><td></td></tr> <tr> <td>SURCHARGE</td><td></td><td></td><td></td></tr> <tr> <td>DOCUMENT FEE</td><td></td><td></td><td></td></tr> <tr> <td>V.A.T</td><td></td><td></td><td></td></tr> <tr> <td>TOTAL</td><td></td><td></td><td></td></tr> </table>				RATE				CHARGE				SURCHARGE				DOCUMENT FEE				V.A.T				TOTAL			
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By your signature, you confirm that you have read the Conditions of Consignment on the back of this document and that you agree to be bound by all the Conditions.

PLEASE USE BALLPOINT PEN AND PRESS HARD