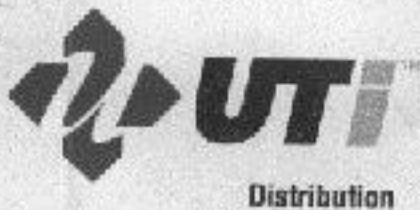


CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
t/a UTI Distribution
PO Box 63, The Reads 0061
Tel: (012) 673-2000
Reg. No. 2004/015747/07
VAT Reg. No. 4260213673



SUBBD21996361

Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>ATM SOLUTIONS</u>				Company Name <u>ATM SOLUTIONS</u>				<input type="checkbox"/> Same Day	
Street Address <u>7 DELPHI STR</u>				Street Address <u>HOLD FOR COLLECTION</u>				<input type="checkbox"/> Express	
Suburb <u>MALBORO</u>				Suburb <u>LINTHATHA</u>				<input type="checkbox"/> With Sunrise Option	
City/Town <u>JHB</u> Postal Code <u> </u>				City/Town <u>UMTATA</u> Postal Code <u> </u>				<input type="checkbox"/> With Saturday Service	
Contact <u>DEBRA</u>				Contact <u> </u>				<input checked="" type="checkbox"/> Public Holiday Service	
Phone <u>0115555020</u>				Phone <u> </u>				<input checked="" type="checkbox"/> Economy	
Destination Country <u>South Africa</u>				Other (Please Specify) <u> </u>				<input type="checkbox"/> After Hours	
Sender's Reference <u> </u>				Analysis Code <u> </u>				<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. <u>027766</u>				<input type="checkbox"/> Bill To Sender <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <u> </u>					
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER. (SEE CLAUSE 12.14 OVERLEAF). GOODS ARE SHIPPED AT OWNER'S RISK, SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 12.5, 12.6 AND 12.7 OVERLEAF).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number <u> </u>					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
<u>1</u>		<u> </u>		<u> </u>		<u> </u>		<u> </u>	
Goods received in full without damage (unless endorsed)					Received By UTI				
Name Of Receiver (PLEASE PRINT CLEARLY) <u>SONWABO</u>					Name Of Courier (PLEASE PRINT CLEARLY) <u>MWIKEN</u>				
Date Received: <u>13/12/16</u>					Date Received: <u>09/12/16</u>				
Time Received: <u>1050</u>					Time Received: <u>1430</u>				
Signature: <u>[Signature]</u>					Signature: <u>[Signature]</u>				