



**Johannesburg**  
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Fax: +27 865 402 378  
ops@emit.za.net

**Cape Town**  
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**Durban**  
Unit 10, Gate 3  
124 Escom Road, New Germany  
Industrial Park, Pinetown, KZN  
Tel: +27 31 705 7827  
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**Port Elizabeth**  
Unit 10, Aldo Business Park  
Gate 2, Greenbushes Industrial Park  
Old Cape Road, Greenbushes  
Tel: +27 41 372 1193



**EMIT 334638**

ACCOUNT NUMBER MOV001	CLIENT REFERENCE 878/CANISTER/SW ALLO	OFFICE REFERENCE 878/CANISTER/SW ALLO	DATE
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SENDER (Your Name) LE GEUSET RD SA	TEL	RECEIVER (Name)	031 572 5045
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COMPANY (Name)	COMPANY (Name) LE CREUST LA LUCIA....
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STREET ADDRESS (Dept./Floor) UNIT 5 HERON PARK	STREET ADDRESS (Dept./Floor) SHOP 3
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OLIVE GROVE INDUSTRIAL ES POSTAL CODE	90 WILLIAM CAMPBELL LA LUCIA MALL POSTAL CODE
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CITY OLD PAARDEVLEI	SUBURB	CITY DURBAN	SUBURB
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NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
4	BOXES	62	42	38		104	
5	BOXES	46	46	52		117	
1	BOX	46	46	27		4	
received only 9 boxes -							
COLLECTED BY:							
SIGNATURE:							
DATE: 4/11/16 TIME:							

TEST WEIGHT (OFFICE USE)	225kg
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SERVICES PLEASE SELECT SERVICE / IN BOX			
DOOR TO DOOR ECONOMY <input type="checkbox"/>	DIRECT LOAD <input type="checkbox"/>	AIR <input type="checkbox"/>	SAME DAY <input type="checkbox"/>
		HAZARDOUS CARGO <input type="checkbox"/>	

OFFICE USE ONLY	NAME	DATE	SIGN	OUR SIGNATURE ACKNOWLEDGE HAVE SEEN AND UNDERSTOOD AND AGREE TO BE BOUND BY TERMS AND CONDITIONS OF CARRIAGE (SEE REVERSE)
CHECKED IN	JUSTIN	04/11/16		SENDER'S SIGNATURE:
CHECKED OUT	PETER	04.11.16		PRINT NAME: TRAVEL
CHECKED IN	Elizabeth	07/11/16		PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION
CHECKED OUT				RECEIVER'S SIGNATURE:
				PRINT NAME: Helen

WHEN NO SERVICE IS INDICATED WE RESERVE THE RIGHT TO DESPATCH AND CHARGE AT THE PUBLISHED STANDARD RATES.  
WE DRAW YOUR ATTENTION TO THE SUMMARISED VERSION OF OUR TERMS & CONDITIONS AS ACCEPTED BY YOU ON THE REVERSE OF OUR WAYBILL.  
YOU ACKNOWLEDGE THAT YOU HAVE THE AUTHORITY TO ACCEPT THESE TERMS & CONDITIONS FOR AND ON BEHALF OF THE CUSTOMER.

Ugdpert.F 031 560 2300 07/2013



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EMIT 334638

ACCOUNT NUMBER: MOV001  
CLIENT REFERENCE: 878/CANISTER/SW ALLO  
OFFICE REFERENCE: 878/CANISTER/SW ALLO  
DATE:

SENDER (Your Name):  
COMPANY (Name): LE GEUSEI HU SH  
STREET ADDRESS (Dept./Floor): UNIT 5 HERON PARK  
CITY: OLD PHARDELVEI  
SUBURB:  
CITY: DURBAN  
SUBURB:  
RECEIVER (Name):  
COMPANY (Name): LE CREUST LA LUCIA....  
STREET ADDRESS (Dept./Floor): SHOP 3  
CITY: DURBAN  
SUBURB:  
POSTAL CODE: 4013

NO OF PACKAGES	DESCRIPTION OF PACKAGE	LENGTH CM	WIDTH CM	HEIGHT CM	VOLUME WEIGHT KG	ACTUAL WEIGHT	SPECIAL INSTRUCTIONS
4	BOXES	62	42	38		104	
5	BOXES	46	46	52		117	
1	BOX	46	46	27		4	

received only  
9 boxes

Received full order

TEST WEIGHT (OFFICE USE): 10 boxes 08/11/2016 225kg

SERVICES PLEASE SELECT SERVICE / IN BOX  
DOOR TO DOOR ECONOMY: ☐ DIRECT LOAD: ☐ AIR: ☐ SAME DAY: ☐ HAZARDOUS CARGO: ☐

OFFICE USE ONLY	NAME	DATE	SIGN
CHECKED IN	JUSTIN	04/11/16	[Signature]
CHECKED OUT	PETER	04.11.16	[Signature]
CHECKED IN	Elizabeth	07/11/16	
CHECKED OUT			

OUR SIGNATURE ACKNOWLEDGES WE HAVE SEEN AND UNDERSTOOD AND AGREE TO BE BOUND BY TERMS AND CONDITIONS OF WAYBILL (SEE REVERSE)

SENDER'S SIGNATURE: [Signature] DATE: 4-11-16  
PRINT NAME: TRAVEL TIME

PROOF OF DELIVERY RECEIVED BY CUSTOMER ON DATE OF DELIVERY

RECEIVER'S SIGNATURE: [Signature] DATE: 07/11/2016  
PRINT NAME: Helen TIME: 3:28

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YOU ACKNOWLEDGE THAT YOU HAVE THE AUTHORITY TO ACCEPT THESE TERMS & CONDITIONS FOR AND ON BEHALF OF THE CUSTOMER.