



TAX INVOICE / WAYBILL



RSA Vat No. 4120147857 Namibia Vat No. 0325084-01-5
 Reg. No. 94/09628/07 Reg. No. 66/1154/07

FP du TOIT MEMBER OF THE INTRACOM GROUP
 P.O. Box 5673, WINDHOEK, NAMIBIA

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 Johannesburg: +27 11 578 9900
 Cape Town: +27 21 846 4500
 Email: jetxcsd@intracom.com.na
 Web: www.intracom.com.na

JX 000 765 719

FILE P.O.D.

Acc. No. to be debited	Cash	Acc. No. to be debited	Cash
Sender: LIEL	Tel: 746472	Receiver: NAZAMA HASSAN	Tel:
Company: LA CROSET NAMIBIA	Company: Alpha Medical Laboratory	Street: Immanuel Shefidi Street	Country: NAM
Street: Cnr Croset Frank Fredericks	City: Windhoek	City: Oshakati	Country: NAM
City: Windhoek	Country: NAM	City: Oshakati	Country: NAM
Email:	Email:		

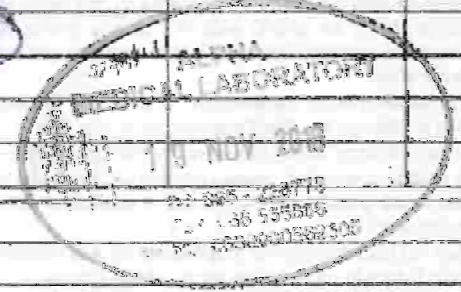
<input checked="" type="checkbox"/> Air Express <input type="checkbox"/> Next Day <input type="checkbox"/> 24-48hrs 24 hours <input type="checkbox"/> 24-48hrs 24 hours <input type="checkbox"/> 24-48hrs 24 hours <input type="checkbox"/> 24-48hrs 24 hours	<input type="checkbox"/> Overnight Road <input type="checkbox"/> Road <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours	<input type="checkbox"/> Domestic Air <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours	<input type="checkbox"/> Domestic Road <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours <input type="checkbox"/> 24-48hrs 48 hours
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* We reserve the right to select any service if none is selected.

Amount recd	RECEIPT NO:
NSR	
SIGN	

Conveyance at owner's risk unless requested. Packs done in terms of FP du Toit Transport practice. Claims must be logged within 7 days of delivery (jetxclaims@intracom.com.na)	
<input checked="" type="checkbox"/> Insurance at 2%	YES <input type="checkbox"/> NO <input type="checkbox"/>
Value of Goods	NSR

Qty	Description of Contents	Dimensions (L x H x W)	Act. Mass	Vol. Mass	Ch. Mass
1X	BOX	36x27x36 (X1)			



Special Instructions:

Sender The sender warrants payment and is bound by conditions of trade. Name: LIEL Signature: L. AEG Date: 18/11/2016 Cell No: 061 266 472	Accepted by JET X Name: Paulina Signature: Paulina Date: 18-11-2016 Time: 15:50	Received goods & CN1 in full and good order. Name: Paulina Signature: Paulina Date: 19/11/16 Time:	Contage Insurance Delivered/Collection fee Vat Total Due NSR
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> 6	◀ Rate our service ▶	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	