

Special Instructions:

Destination Code:

CPT

Service:

ONX

Sender remains liable for all charges if not settled by the nominated party within 30 days.
This shipment is accepted by UTITM subject to the conditions as agreed and acknowledged on the credit application.

DELIVERY NOTE

P.O.D. COPY

Dispatched on 31 July 2018

159398



LEECS10285917

SHIPMENT DETAILS From: LE CREUSET Contact: MARY Phone: 0213001779	159398,	<div style="border: 1px solid black; padding: 5px;"> <p>31/07/2018</p> <p>Le Creuset</p> <p>To: ELANIE VAN ZYL LANDBANK BELVEDERE OFFICE PARK 0 PASITA Street DURBANVILLE CAPE TOWN 7550 SOUTH AFRICA</p> <p>Contact: ELANIE VAN ZYL Phone: 0835820427 Ref: 159398</p> </div> <div style="text-align: right; margin-top: 10px;"> <p>LEECT10291108</p> <p>SHIPMENT: LEECS10285917</p> <p>REPRINT: REPRINT</p> <p>PARCEL MASS: 2.00</p> <div style="border: 2px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>ONX</p> <p>HUB: SUNCPT</p> <p>TOWN: CPT</p> <p>ZONE:</p> </div> <p>Parcel 1 of 1</p> </div>		
To: ELANIE VAN ZYL LANDBANK BELVEDERE OFFICE PARK 0 PASITA STREET DURBANVILLE, 7550 CAPE TOWN Contact: ELANIE VAN ZYL Phone: 0835820427		<table border="1" style="width: 100%;"> <tr> <td data-bbox="911 946 1391 1244"> Received by Consignee: Print Name: A SALIK Signature: Date: 01/08/18 Time: 14H30 </td> <td data-bbox="1391 946 1867 1244"> Company Stamp or Endorsements: </td> </tr> </table>	Received by Consignee: Print Name: A SALIK Signature: Date: 01/08/18 Time: 14H30	Company Stamp or Endorsements:
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Origin Code: SSW Destination Code: CPT Service: 1 Liability Value: R0 Incidental Liability R Analysis Code: Contents: --- Account No: 027877 Account Holder: S Account Name: LE CREUSET No. of Parcels: 1 Total Mass: 2 Total Volume: 6800 References:				