



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/07
VAT. No. 4880189685



SUBBD28131467

2 2 2 E E E 2 2 2

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET	Company Name	LE CREUSET
Street Address	SHOP 312E UPPER LEVEL HEUWEL & GORDAN HODS ROAD CENTURION MALL	Street Address	UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL ESTATE OLD PARDEVLEI ROAD
Suburb	CENTURION	Suburb	SOMERSET WEST
City / Town	PRETORIA	City / Town	CAPE TOWN
Postal Code	0151	Postal Code	8001
Contact	FUREKA	Contact	VICKY
Phone	012 004 0217	Phone	021 851 7178

Mark Service Required
Same Day
Express <input checked="" type="checkbox"/>
With Sunrise Option
With Saturday Service
Public Holiday Service
Economy
After Hours
BLNS Customs Tariff

Destination Country	South Africa <input checked="" type="checkbox"/>	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
---------------------	--	----------	---------	---------	-----------	------------------------

Sender's Reference	Analysis Code
--------------------	---------------

SPECIAL INSTRUCTIONS

Bill Charges To Account No.	027766	Bill To Sender <input type="checkbox"/>	Consignee <input type="checkbox"/>	Other (Name Please) <input type="checkbox"/>
-----------------------------	--------	---	------------------------------------	--

If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.

IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.14 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 14.5 OVERLEAF). IF YOU WISH DSV DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 14.5, 14.6 AND 14.7 OVERLEAF).

[Signature]
SENDER'S AUTHORISED SIGNATURE **DATE** 01/06/2018

1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>

Total Mass (Kg)

e-mail / Fax / Proof of Delivery e-mail Address / Fax Number

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT(CM)
1	FLYER			

Goods received in full without damage (unless endorsed)
Name Of Receiver (PLEASE PRINT CLEARLY)

J B ENADE

Date Received: 050618 Time Received: 0945

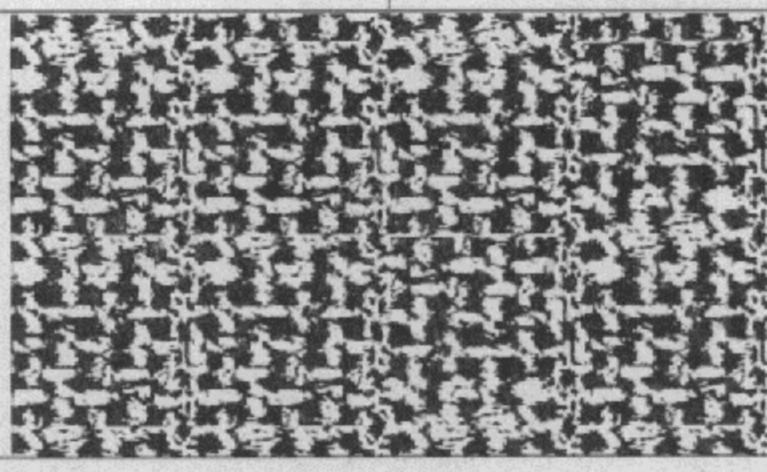
Signature: *[Signature]*

Received By DSV
Name Of Courier (PLEASE PRINT CLEARLY)

EZE ME

Date Received: 090618 Time Received: 1159

Signature: *[Signature]*



Version Control (08/2017)