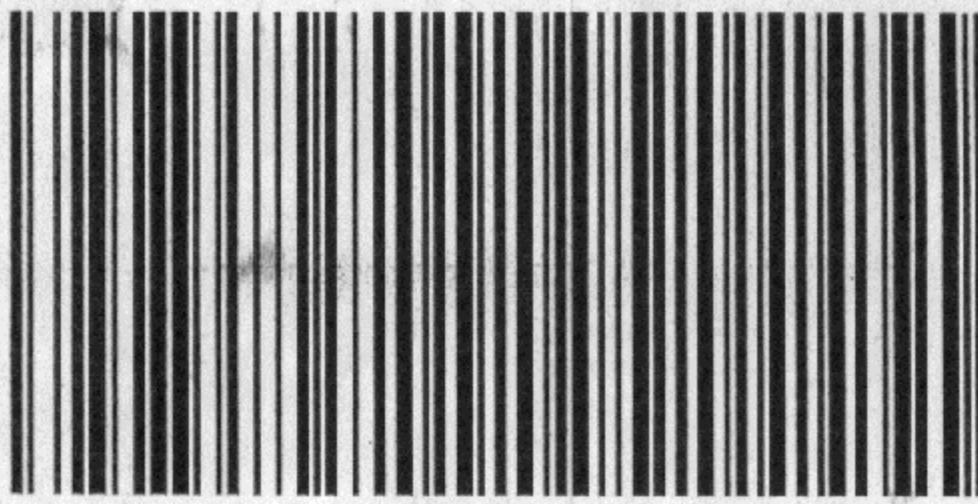


CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd  
 t/a UTI Sun Couriers  
 PO Box 63, The Reeds 0061  
 Tel (012) 673-2000  
 Reg. No. 2004/015747/07  
 VAT Reg. No. 4260213873



ADDITIONAL					
TRACKING					
NUMBERS					

**SUBCD26250233**

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required		
Company Name <b>LE CREUSET</b>		Company Name <b>LE CREUSET CPT</b>				Same Day		
Street Address <b>SHOP UL 262, PAVILION SHOPPING CENTRE JACK MAARTIENS DRIVE</b>		Street Address <b>UNIT 5, HERON PARK OLIVE GROVE IND ESTATE SOMERSET WEST</b>				Express		
Suburb <b>NESTVILLE</b>		Suburb				With Sunrise Option		
City / Town <b>DUR</b>	Postal Code <b>4000</b>	City / Town <b>SOMERSET WEST (SSW)</b>	Postal Code <b>8000</b>			With Saturday Service		
Contact <b>RASHREE TRISINDA</b>		Contact <b>JEDDA</b>				Public Holiday Service		
Phone <b>031 265 8455</b>		Phone <b>021 851 7178</b>				Economy <input checked="" type="checkbox"/>		
Destination Country		South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)	After Hours
Sender's Reference		Analysis Code				BLNS Customs Tariff Lines		
<b>SPECIAL INSTRUCTIONS</b>								
Bill Charges To Account No. <b>027766</b>		Bill To Sender <input checked="" type="checkbox"/>	Consignee <input type="checkbox"/>	Other (Name Please) <input type="checkbox"/>			Depot Hand In	
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 SUN COURIERS LIMITS ITS LIABILITY TO R250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI SUN COURIERS TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSES 12.5, 12.6 AND 12.7 OVERLEAF).								
SENDER'S AUTHORIZED SIGNATURE					DATE <b>09/04/18</b>			
e-mail / Fax / Proof of delivery <input type="checkbox"/> e-mail Address / Fax Number								
<b>Total Parcels</b>	<b>NO. OF PARCELS</b>	<b>Dimensions In Centimetres</b>			<b>HEIGHT</b>	<b>Mass (kg)</b>	Original POD Required P.O. Box	
1	1 X	BOX						
<b>Goods received in full without damage (unless endorsed)</b>				<b>Received by UTI</b>				
Name Of Receiver (PLEASE PRINT CLEARLY) <b>ELVINO</b>				Name Of Courier (PLEASE PRINT CLEARLY) <b>NO RON</b>				
Date Received: <b>11/04/18</b>		Time Received: <b>1010</b>		Date Received: <b>09/04/18</b>		Time Received: <b>11:00</b>		
Signature				Signature				

Lithotech SJ (011) 474-1828 Version Control [10/2012] sun00014 1012