TAX INVOICE / WAYBILL

40926

FROM: SENDER'S NAME AND ADDRESS					TO: CONSIGNEE'S NAME AND ADDRESS				
Giftu	hap	el Top Com, Gallo		for	M5	Me	edi'a		
PTA East CODE:				-	Scunda			POSTAL CODE:	
CONTACT NAME TEL. No.			CONTACT NAME			TEL. No.			
							06		
PKGS.	CRIPTION (ONS (CENTIMETRES) Breadth Height		MASS CUBE KGS	OFFIC	OFFICE USE	
1 30	+		AFRICA		Acount N Quote No Invoice N		FREIGHT FUEL SURCHARGE		
Address READOR ROAD BENROSE POS 047517							ALL RISKS INSUR. ADDITIONAL CHARGES		
							VAT		
LIENT'S OWN SHIPMENT REFERENCE							TOTAL		G
FINESTRA		SENDER DATE OF CONSIGNMENT RECEIVED IN GOOD ORDER							
Time				RECEN	ED IN GO	OD ORDEI	1		
23-4	7,	CONSIGNEE SIGNATURE					Date of Receipt		
Date PRINT NAME>					Time of Receipt				
That Giftwrap That the goods	s received a complied w s have beer	are the goods ord ith the terms and n received in good	conditions a				by the client.		
Stock checked by	y: <u>M</u> C								
No of boxes:		1 box.							