



HEAD OFFICE:
P O Box 532
Lanseria
1748

97X6NB

To (Contact Name):

Postal Code

Postal Code

SERVICES REQUIRED- Please tick appropriate box(es)	CHARGES
☐ 1. Basic service (one person) ☐ 2. Basic service (two people) ☐ 3. Basic service (three people) ☐ 4. Basic service (four people) ☐ 5. Basic service (five people) ☐ 6. Basic service (six people) ☐ 7. Basic service (seven people) ☐ 8. Basic service (eight people) ☐ 9. Basic service (nine people) ☐ 10. Basic service (ten people) ☐ 11. Basic service (eleven people) ☐ 12. Basic service (twelve people) ☐ 13. Basic service (thirteen people) ☐ 14. Basic service (fourteen people) ☐ 15. Basic service (fifteen people) ☐ 16. Basic service (sixteen people) ☐ 17. Basic service (seventeen people) ☐ 18. Basic service (eighteen people) ☐ 19. Basic service (twenty people) ☐ 20. Basic service (twenty-one people) ☐ 21. Basic service (twenty-two people) ☐ 22. Basic service (twenty-three people) ☐ 23. Basic service (twenty-four people) ☐ 24. Basic service (twenty-five people) ☐ 25. Basic service (twenty-six people) ☐ 26. Basic service (twenty-seven people) ☐ 27. Basic service (twenty-eight people) ☐ 28. 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SERVICES REQUIRED: Please tick appropriate box(es)				CHARGES	R	C
1	SAME DAY EXPRESS	8	INTERNATIONAL DOCUMENTS			
2	LOCAL OVERNIGHT COURIER BAG	9	INTERNATIONAL PARCELS			
3	LOCAL SAME DAY COURIER BAG	10	INTERNATIONAL AIR FREIGHT			
4	SAME DAY ECONOMY	11	AFTER HOURS SERVICE			
5	OVERNIGHT COURIER	12	SATURDAY SERVICE			
6	DOMESTIC AIR FREIGHT	13	EARLY BIRD		VAT	
7	DOMESTIC ROAD FREIGHT	14	NATIONAL FLVLR ECONOMY SERVICE		TOTAL	

RECEIVED BY

RECEIVER'S
SIGNATURE

Confirmation that goods were received in good condition

DATE: / /

TIME:

(VERY IMPORTANT)

2nd Copy: PROOF OF DELIVERY

3rd Copy: RECEIVERS COPY

4th Copy: SENDERS COPY

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