

No of boxes:


Worldwide Express
 We would love to handle your package

HEAD OFFICE: Sharecall No.:
 P O Box 532 0861 203 203
 Lanseria After Hours Whatsappapp:
 082 823 3254
 Email: support@thecourierguy.co.za

8ZBDGB 1

ACCOUNT NO. (Very Important)

CLIENT REFERENCE

DATE DD MM YY

PARCELS

MASS

VOLUME

ORIGIN

DEST

OFFICE REFERENCE

Contact Name:

Contact Phone Number (Very Important)

Company Name:

To (Contact Name):

Contact Phone Number (Very Important)

Street Address:

Exact Street Address (We cannot deliver to Box Numbers):

City

Country

Postal Code

City

Country

Postal Code

Special Instructions

SERVICES REQUIRED: Please tick appropriate box(es)

CHARGES

R

c

NUMBER

DESCRIPTION OF CONTENTS

ACTUAL WEIGHT

DIMENSIONS (cm)

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

7

DOMESTIC ROAD FREIGHT

14

NATIONAL FLYER ECONOMY SERVICE

TOTAL

VAT

DATE: / /

TIME: /

By virtue of the clients signature hereto, the client acknowledges having read, understood, and agreed to be bound by the standard conditions of carriage of The Courier Guy (Pty) Ltd., which standard conditions are annexed hereto.

INSURANCE (ONLY DECLARE VALUE IF YES) DECLARED VALUE R

CLIENT SIGNATURE

RECEIVED BY THE COURIER GUY (Pty) Ltd.:

RECEIVER'S SIGNATURE

PRINT SURNAME AND INITIALS

DATE: / /

TIME: /

Confirmation that goods were received in good condition

DATE: / /

TIME: /

(VERY IMPORTANT)

DATE: 26/7/15

TIME: 14:00

(VERY IMPORTANT)

DATE: / /

TIME: /

1st Copy: THE COURIER GUY (Pty) Ltd. COPY

2nd Copy: PROOF OF DELIVERY

3rd Copy: RECEIVERS COPY

4th Copy: SENDERS COPY

No.:

3

7

30

Qty