Z.T. Couriers

For all your courier & Freight Overnight Service

Unlimited Delivery Service

Consignee Name & Address:

Supplier's Name & Address:

Send with courier / client :

No of boxes:

JHB - Nelspruit - SWD

P.O Box 2656 Mbabane, Eswatini +268 7645 0336 +276 3131 6948 Mbabane House Office No. 203

WAYBILL 2053

Cripe wrap Tradi	ng C	RM	70	vest i	ments	NAME: VOLUSI	
Prevoria		Mbabane				TIME: DATE: 15 08 83	
Contact Person:	Contr	Contact Person: Telephone No: Account No.				SIGNATURE: SUPPLIER'S SIGNATURE	
elephone No:	2000						
Sender's Reference	1 1						
No. of Packages Contents	Mass (Kg)	Length	Breadth	Height	Volume m*	SUPPLIER'S NAME (PRINT)	
Ot JIDOK						DATE TIME SUPPLIER'S STAM CONSIGNEE SIG	
						SIGNATURE	
						NAME (PRINT)	
ECIAL INSTRUCTIONS						DATE TIME STAMP Empower Press \$\alpha\$ 3560 12	
NSTORIZZ N	NAME	si		SIGN	NATURE		
Signature confirms:							
That the goods received are the goods.	ods ordered	as they v	were specif	ied in the	order.		
That Giftwrap complied with the term That the goods have been received.	ns and con in good ord	ditions as der.	set out in i	t's quotati	ion accepted	by the client.	
For Office use only							