


DRAFT SCOPING REPORT DISTRIBUTION LIST

ENVIRONMENTAL IMPACT ASSESSMENT (EIA) PROCESS AND WATER USE LICENSE (WULA) APPLICATION FOR THE TWO ALLUVIAL DIAMOND PROSPECTING RIGHT APPLICATIONS WITH BULK SAMPLING BY SAMARA MINING PTY LTD ON THE LEFT BANK OF THE ORANGE RIVER NEAR SENDELINGSDRIF, RICHTERSVELD, NAMAQUA DISTRICT OF THE NORTHERN CAPE PROVINCE (DMR REFERENCE NUMBERS: NCS 30/5/1/1/2/1 (12664) PR, NCS 30/5/1/1/2/1 (12663) PR)

DISTRIBUTION LIST

No	Organisation	Contact	Documents	Date, Sign & Stamp
PUBLIC LIBRARIES				
1	SANDRIF Sanddrift Public Library Reier Avenue, Sanddrift, 8289	Marlene Fredericks Tel: 073 077 5000	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 5 x Stakeholder Notification Letters 10 x Comment Sheets HARD COPY	<i>Westerh</i> 0730775000 Sanddriftlib@ncpg.gov.za
2	SENDELINGSDRIF Sendelingsdrif SANPARKs Office 1 Marshall Street, Sendelingsdrif, 8290	Briston Adams Hospitality and services Manager: Tel: 078 572 1047	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 5 x Stakeholder Notification Letters 10 x Comment Sheets HARD COPY	<i>Briston Adams</i> briston.adams@sanparks.org <i>Briston Adams 078 572 1047</i>
3	KUBOES Kuboes Public Library 89 Kwaggastreet, Kuboes, 8292	Valerie De Klerk Tel: 078 974 9751	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 5 x Stakeholder Notification Letters 10 x Comment Sheets HARD COPY	16 Nov 2020 <i>W. de Klerk</i> wilhelinkso8@gmail.com
4	LEKKERSING Lekkersing Public Library	Julanda Fieland Tel: 072 848 8928	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1	<i>J. Fieland</i> julandafieland@gmail.com J.fieland 0728488928

	200 Cloete Street, Lekkersing, 8283		5 x Stakeholder Notification Letters 10 x Comment Sheets HARD COPY	
5	EKSTEENFONTEIN Esksteenfontein Public Library (next to Esksteen Municipal Office) Skool Straat, Eksteenfontein	There is no one in charge at the moment. Ask Municipal Officer to place in Library. Contact: Marissa Farmer Tel: 084 657 2153	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 5 x Stakeholder Notification Letters 10 x Comment Sheets HARD COPY	DONE M. FARMER eksteenfontein@richtersveld. gov.za 0846572153
6	ALEXANDER BAY Alexander Bay Public Library Oranje Weg, Alexander Bay	Madelyn September Tel: 083 468 3672	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 5 x Stakeholder Notification Letters 10 x Comment Sheets HARD COPY	 willie.haksob@gmail.com
LOCAL AND DISTRICT AUTHORITIES				
7	PORT NOLLOTH Richtersveld Local Municipality 169 Main Road, Port Nolloth, 8280	Ivan Cloete Municipal Environmental Manager Tel: 027 851 1125 / 082 441 1009	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 1 x Stakeholder Notification Letter 1 x Comment Sheet HARD COPY	F. Cloete Ivan Cloete 027 851 1112 ivan@richtersveld.gov.za
8	SPRINGBOK Namakwa District Local Municipality Hendrik Visser Building Van Riebeeck Street Springbok, 8240	Jannie Loubser Economic Development & Tourism Development Tel: 027 712 8024 / 083 252 3136 (Not available over weekend)	X1 Draft Scoping Report for PRAA 1 X1 Draft Scoping Report for PRAA 1 1 x Stakeholder Notification Letter 1 x Comment Sheet HARD COPY	Lucinde Bonn lucindeb@namakwa-dm.gov.za jannie@namakwa-dm.gov.za 027 712 8000 J Loubser



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TCG26683010

ACCOUNT NO. (Very Important) THCASH	CLIENT REFERENCE	DD	DATE MM	YY	PARCELS	MASS 2.3	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
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Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important): **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**

Street Address: **160 MARSHALL STREET**

City: **ROSKWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

To (Contact Name): **AVINE NYALAZA** Contact Phone Number (Very Important): **(060) 991 4817**

Company Name: **NORTHERN CAPE DEPT. ENVIRONMENTAL AFFAIRS**

Exact Street Address (We cannot deliver to Box Numbers): **AND NATURE CONSERV.**

90 VOORTREKKER AND MAGASYN STREET

City: **SPRINGBOK** Country: **SOUTH AFRICA** Postal Code: **8240**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)	
1	Flyer		x	30 x 1
			x	x
			x	x

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 Y N

(ONLY DECLARE VALUE IF YES)

DECLARED VALUE R

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 FLYER ECONOMY SERVICE	TOTAL	100	—

CLIENT SIGNATURE: **M Botha** (VERY IMPORTANT)

RECEIVED BY THE COURIER GUY (Pty) Ltd.:

DATE: **2020/11/17** TIME: **15:11**

Confirmation that goods were received in good condition

RECEIVER'S SIGNATURE: _____ DATE: / /

PRINT SURNAME AND INITIALS: _____ (VERY IMPORTANT) TIME: _____

PLEASE PRINT - USE A BALL POINT PEN AND PRESS HARD (5 COPIES)

1st Copy: THE COURIER GUY (Pty) Ltd. COPY 2nd Copy: COPY VAT INVOICE 3rd Copy: PROOF OF DELIVERY 4th Copy: RECEIVERS COPY 5th Copy: SENDERS COPY



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TCG26683013

ACCOUNT NO. (Very Important) TH CASH	CLIENT REFERENCE	DD 17	DATE MM 11	YY 2020	PARCELS	MASS 2.3	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
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Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important): **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**

Street Address: **160 MARSHALL STREET.**

City: **POCOKWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

To (Contact Name): **SHONISANI MUZHEZI** Contact Phone Number (Very Important): **(012) 399 9171**

Company Name: **NATIONAL DEPT. ENVIRONMENT, FORESTRY, FISH**

Exact Street Address (We cannot deliver to Box Numbers):
06: BIODIVERSITY AND CONSERVATION

ENVIRONMENT HOUSE, 473 STEVE BIKO ROAD

City: **ARCADIA, PRETORIA,** Country: **RSA** Postal Code: **0002**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)		
1	FUYER	2.3	40	30	1
			x	x	
			x	x	

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INSURANCE Y N

(ONLY DECLARE VALUE IF YES)
DECLARED VALUE R **N/A**

SERVICES REQUIRED: Please tick appropriate box(es)				CHARGES	
				R	c
1	<input type="checkbox"/> SAME DAY EXPRESS	8	<input type="checkbox"/> INTERNATIONAL DOCUMENTS		
2	<input type="checkbox"/> LOCAL OVERNIGHT COURIER BAG	9	<input type="checkbox"/> INTERNATIONAL PARCELS		
3	<input type="checkbox"/> LOCAL SAME DAY COURIER BAG	10	<input type="checkbox"/> INTERNATIONAL AIR FREIGHT		
4	<input type="checkbox"/> SAME DAY ECONOMY	11	<input type="checkbox"/> AFTER HOURS SERVICE		
5	<input type="checkbox"/> OVERNIGHT COURIER	12	<input type="checkbox"/> SATURDAY SERVICE		
6	<input type="checkbox"/> DOMESTIC AIR FREIGHT	13	<input type="checkbox"/> EARLY BIRD	VAT	
7	<input checked="" type="checkbox"/> DOMESTIC ROAD FREIGHT	14	<input type="checkbox"/> NATIONAL FLYER ECONOMY SERVICE	TOTAL	100.00

CLIENT SIGNATURE: **[Signature]** (VERY IMPORTANT)

RECEIVED BY THE COURIER GUY (Pty) Ltd.: **Shere**

DATE: **2020 11 17** TIME: **14:53**

Confirmation that goods were received in good condition

RECEIVER'S SIGNATURE: _____ DATE: / /

PRINT SURNAME AND INITIALS: _____ (VERY IMPORTANT) TIME: _____

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TCG26683008

ACCOUNT NO. (Very Important) **TO CASH** CLIENT REFERENCE _____ DD: _____ DATE MM: _____ YY: _____ PARCELS: _____ MASS: **2-3** VOLUME: _____ ORIGIN: _____ DEST: _____ OFFICE REFERENCE: _____

Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important): **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**
Street Address: **160 MARSHALL STREET**

City: **POORWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)	
1	FLYER		x 30	x 1
			x	x
			x	x

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 Y N
(ONLY DECLARE VALUE IF YES)
DECLARED VALUE R

CLIENT SIGNATURE: **M Botha** (VERY IMPORTANT)
RECEIVED BY THE COURIER GUY (Pty) Ltd.:
DATE: **17/11/2020** TIME: **15:16**

To (Contact Name): **RUWAYOBA BAULAKU (083) 459 7602** Contact Phone Number (Very Important)

Company Name: **NORTHERN CAPE DEPT. PUBLIC WORKS**
Exact Street Address (We cannot deliver to Box Numbers):
OLD MAGISTRATES COURT

City: **23 MARKET STREET** Country: **KIMBERLEY** Postal Code: **SOUTH AFRICA 8301**

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 FLYER ECONOMY SERVICE	TOTAL	100.00

RECEIVER'S SIGNATURE: _____ Confirmation that goods were received in good condition
PRINT SURNAME AND INITIALS: _____ (VERY IMPORTANT)
DATE: / / TIME:

1st Copy: THE COURIER GUY (Pty) Ltd. COPY
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TCG26683009

ACCOUNT NO. (Very Important) TH CASH	CLIENT REFERENCE	DD	DATE MM	YY	PARCELS	MASS	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
						2.3				

Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important) **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**

Street Address: **160 MARSHALL STREET**

City: **POLOKWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

To (Contact Name): **ALEXIA HLENOANI** Contact Phone Number (Very Important) **(082) 819 4687**

Company Name: **DEPARTMENT WATER AND SANITATION**

Exact Street Address (We cannot deliver to Box Numbers): **LOUIS VALE ROAD**

City: **UPINGTON** Country: **SOUTH AFRICA** Postal Code: **8800**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)
1	Flyer		x 30 x 1
			x x
			x x

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 Y N

(ONLY DECLARE VALUE IF YES)

DECLARED VALUE R

CLIENT SIGNATURE
Mari Botha

RECEIVED BY THE COURIER GUY (Pty) Ltd.: **[Signature]**

DATE: **17/11/2020** TIME: **15:12**

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 FLYER ECONOMY SERVICE	TOTAL		100	-

Confirmation that goods were received in good condition

RECEIVER'S SIGNATURE _____ DATE: **1 / 1 /**

PRINT SURNAME AND INITIALS _____ TIME: _____

(VERY IMPORTANT)

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TCG26683007

ACCOUNT NO. (Very Important) TO CASH	CLIENT REFERENCE	DD	DATE MM	YY	PARCELS	MASS	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
						2.3				

Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important) **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**

Street Address: **160 MARSHALL STREET**

City: **POLOKWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

To (Contact Name): **WIETSCHG ROETS** Contact Phone Number (Very Important) **(082) 604 7730**

Company Name: **DEPARTMENT WATER AND SANITATION**

Exact Street Address (We cannot deliver to Box Numbers):
DIRECTORATE WATER ABSTRACTION + INSTREAM USE
185 FRANCIS BAARD STREET, SENIBENG BLDG

City: **ROOM 437A, PRETORIA, RSA** Country: **RSA** Postal Code: **0001**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)	
1	FLYER		x	30 x 1
			x	x
			x	x

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INSURANCE Y N
(ONLY DECLARE VALUE IF YES)
DECLARED VALUE R

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 FLYER ECONOMY SERVICE	TOTAL	100	-	

CLIENT SIGNATURE:

RECEIVED BY THE COURIER GUY (Pty) Ltd.:
DATE: **2020, 11, 17** TIME: **15:16**

RECEIVER'S SIGNATURE: _____ DATE: / /

PRINT SURNAME AND INITIALS: _____ TIME: _____

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TCG26683011

ACCOUNT NO. (Very Important) THCASH	CLIENT REFERENCE	DD	DATE MM	YY	PARCELS	MASS 23	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
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Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important) **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**

Street Address: **160 MARSHALL STREET**

City **POLOKWANE** Country **SOUTH AFRICA** Postal Code **0699**

To (Contact Name): **GAIL LETIMELA** Contact Phone Number (Very Important) **(081) 534 2075**

Company Name: **NORTHERN CAPE DENC**

Exact Street Address (We cannot deliver to Box Numbers):
SASSO BUILDING
90 LONG STREET

City **KIMBERLEY** Country **SOUTH AFRICA** Postal Code **8300**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)	
1	FLYER		40	30 x 1
			x	x
			x	x

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 FLYER ECONOMY SERVICE	TOTAL		R100	—

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 Y N
(ONLY DECLARE VALUE IF YES)
DECLARED VALUE R **NA**

CLIENT SIGNATURE: **M Botha**
(VERY IMPORTANT)

RECEIVED BY THE COURIER GUY (Pty) Ltd.: **Sheree**
DATE: **2020 11 17** TIME: **15:11**

Confirmation that goods were received in good condition

RECEIVER'S SIGNATURE: _____ DATE: / /

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ACCOUNT NO. (Very Important) TH CASH	CLIENT REFERENCE	DD	DATE MM	YY	PARCELS	MASS	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
						2.3				

Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important) **(084) 226 5584**

To (Contact Name): **KALLIE NAUDE** Contact Phone Number (Very Important) **(066) 298 5217**

Company Name: **NALEPZI ENVIRONMENTAL CONSULTANTS**

Company Name: **NATIONAL DEPT. ENVIRONMENT, FORESTRY, FISH**

Street Address: **160 MARSHALL STREET**

Exact Street Address (We cannot deliver to Box Numbers):
PROTECTED AREAS: TFCA + PROTECTED AREAS

City: **POLOKWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

City: **ARCADIA, PRETORIA,** Country: **RSA** Postal Code: **0002**

Special Instructions

SERVICES REQUIRED: Please tick appropriate box(es)				CHARGES	
		R	c		

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)	
1	FLYER		x	30 x 1
			x	x
			x	x

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		
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5	OVERNIGHT COURIER	12	SATURDAY SERVICE		
6	DOMESTIC AIR FREIGHT	13	EARLY BIRD	VAT	
7	DOMESTIC ROAD FREIGHT	14	NATIONAL FLYER ECONOMY SERVICE	TOTAL	100

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 Y N
(ONLY DECLARE VALUE IF YES)
DECLARED VALUE R

CLIENT SIGNATURE
(VERY IMPORTANT)

RECEIVED BY THE COURIER GUY (Pty) Ltd.: **A**
DATE: **2020/11/17** TIME: **15:16**

RECEIVER'S SIGNATURE
PRINT SURNAME AND INITIALS
(VERY IMPORTANT)

Confirmation that goods were received in good condition
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TIME:

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TCG26683014

ACCOUNT NO. (Very Important) TPCASH	CLIENT REFERENCE	DD	DATE MM	YY	PARCELS	MASS 2-3	VOLUME	ORIGIN	DEST.	OFFICE REFERENCE
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Contact Name: **MARISSA BOTHA** Contact Phone Number (Very Important) **(084) 226 5584**

Company Name: **NALEDZI ENVIRONMENTAL CONSULTANTS**

Street Address: **160 MARSHALL STREET**

City: **POLOKWANE** Country: **SOUTH AFRICA** Postal Code: **0699**

To (Contact Name): **TIMOTHY KATA** Contact Phone Number (Very Important) **(079) 036 9695**

Company Name: **NGINAO BOSWA KAPA BOKONI HERITAGE AUTHORITY**

Exact Street Address (We cannot deliver to Box Numbers):
1 MONRODGE OFFICE PARK
% KEKENICH DRIVE - MEMORIAL ROAD

City: **KIMBERLEY** Country: **SOUTH AFRICA** Postal Code: **8300**

Special Instructions

NUMBER	DESCRIPTION OF CONTENTS	ACTUAL WEIGHT	DIMENSIONS (cm)
1	FLYER		x 30 x 1
			x x
			x x

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 Y N
(ONLY DECLARE VALUE IF YES)
DECLARED VALUE R

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				
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5	OVERNIGHT COURIER	12	SATURDAY SERVICE				
6	DOMESTIC AIR FREIGHT	13	EARLY BIRD	VAT			
7	DOMESTIC ROAD FREIGHT	14	NATIONAL FLYER ECONOMY SERVICE	TOTAL	100		-

CLIENT SIGNATURE: **[Signature]** (VERY IMPORTANT)

RECEIVED BY THE COURIER GUY (Pty) Ltd.:
DATE: **2020, 11, 17** TIME: **15:16**

Confirmation that goods were received in good condition

RECEIVER'S SIGNATURE: _____ DATE: / /

PRINT SURNAME AND INITIALS: _____ (VERY IMPORTANT) TIME: _____

PLEASE PRINT - USE A BALL POINT PEN AND PRESS HARD (5 COPIES)

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