

EXL INDIA - 1st Floor, Lala Tower, 5th & 6th
M.E. Road, Sector-14, Gurgaon-122001
Email: customerservice@exlindia.com
Website: www.exlindia.com
Service Tax No. DL-15TB-000431A-2004

53

Org Sc Dst Sc
Amo CRR

TO-PAY **D.O.D.**
Rs. / Rs.

ORIGIN: **Surat** DESTINATION: **Chennai**
CONSIGNOR CODE: **Surat** CONSIGNEE CODE: **Surat**
CITY: **Surat** CITY: **Chennai**
DIST: **Surat** DIST: **Chennai**
PIN: **395001** PIN: **600001**

CS/ST/TIN NO: **27590364489** CS/ST/TIN NO: **32157461481**
NO. OF PACKAGES: **30** NO. OF PACKAGES: **30**
TYPE OF PACKING: **CIB** TYPE OF PACKING: **CIB**
SAID TO CONTAIN: **Electrical Goods** SAID TO CONTAIN: **Electrical Goods**
DECLARED VALUE: **860631** DECLARED VALUE: **860631**
RISK COVERAGE: ☒ OWNER'S RISK ☐ CARRIERS RISK
INS POLICY NO. **456/0708** INS POLICY NO. **456/0708**
DOCUMENT ENCLOSED: ☐ MODVAT COPY ☐ WAY BILL
INVOICE NO. **456/0708** INVOICE NO. **456/0708**
PERMIT NO. **14/11/2008** PERMIT NO. **14/11/2008**
LC NO. **17/01/27408** LC NO. **17/01/27408**

COD/DOD AUTHORIZATION DETAILS
COD/DOD AMOUNT: **860631**
AMOUNT IN WORDS: **Eighty Six Thousand Sixty Three**
THE SHIPPER HEREBY AUTHORIZES EXL India TO COLLECT THE COD/DOD AMOUNT IN FOLLOWING MODE ONLY
☐ CHEQUE ☐ DEMAND DRAFT
SHIPPER'S SIGNATURE: **[Signature]**
NAME: **[Name]** DATE: **[Date]** TIME: **[Time]**
NAME: **[Name]** DATE: **[Date]** TIME: **[Time]**

A DIVISION OF JAIPUR GOLDEN TRANSPORT COMPANY PVT. LTD.

BOOKING DATE: **10/11/08** TIME (Hrs): **5.00pm**
MODE: ☒ SURFACE ☐ AIR
PUP BA CODE: **87243**
DLY BA CODE: **87243**
ACTUAL WT (KGS): **20KGS** CHARGED WT (KGS): **20KGS**
DETAILS: **20KGS** AMOUNT RS: **20KGS**
FREIGHT: **20KGS**
EXCHARGE: **20KGS**
COD/DOD CHG: **20KGS**
DIPLMAT CHARGES: **20KGS**
OTHER CHARGES: **20KGS**
TOTAL SERVICE CH: **100**
DOCKET CHARGES: **150**
20% FUEL & CHARGE: **60**
ST MANAGEMENT CH: **60**
SUB TOTAL: **370**
SERVICE TAX @ **370**
TOTAL: **370**
BILLING STATION: **TBB**
TO PAY: **370**
PAID: **370**
TBB: **370**
SIGNATURE: **[Signature]**

IF UNDELIVERED PLS. CALL 1800-180-0777

EXL INDIA - 1st Floor, Lala Tower, 5th & 6th
M.E. Road, Sector-14, Gurgaon-122001
Email: customerservice@exlindia.com
Website: www.exlindia.com
Service Tax No. DL-15TB-000431A-2004

53

Org Sc Dst Sc
BHI Chennai

TO-PAY **D.O.D.**
Rs. / Rs.

ORIGIN: **Bhiwandi** DESTINATION: **Chennai**
CONSIGNOR CODE: **Bhiwandi** CONSIGNEE CODE: **Chennai**
CITY: **Bhiwandi** CITY: **Chennai**
DIST: **Bhiwandi** DIST: **Chennai**
PIN: **421203** PIN: **600001**

CS/ST/TIN NO: **27590364489** CS/ST/TIN NO: **32157461481**
NO. OF PACKAGES: **30** NO. OF PACKAGES: **30**
TYPE OF PACKING: **CIB** TYPE OF PACKING: **CIB**
SAID TO CONTAIN: **Electrical Goods** SAID TO CONTAIN: **Electrical Goods**
DECLARED VALUE: **860631** DECLARED VALUE: **860631**
RISK COVERAGE: ☒ OWNER'S RISK ☐ CARRIERS RISK
INS POLICY NO. **456/0708** INS POLICY NO. **456/0708**
DOCUMENT ENCLOSED: ☐ MODVAT COPY ☐ WAY BILL
INVOICE NO. **456/0708** INVOICE NO. **456/0708**
PERMIT NO. **14/11/2008** PERMIT NO. **14/11/2008**
LC NO. **17/01/27408** LC NO. **17/01/27408**

COD/DOD AUTHORIZATION DETAILS
COD/DOD AMOUNT: **860631**
AMOUNT IN WORDS: **Eighty Six Thousand Sixty Three**
THE SHIPPER HEREBY AUTHORIZES EXL India TO COLLECT THE COD/DOD AMOUNT IN FOLLOWING MODE ONLY
☐ CHEQUE ☐ DEMAND DRAFT
SHIPPER'S SIGNATURE: **[Signature]**
NAME: **[Name]** DATE: **[Date]** TIME: **[Time]**
NAME: **[Name]** DATE: **[Date]** TIME: **[Time]**

A DIVISION OF JAIPUR GOLDEN TRANSPORT COMPANY PVT. LTD.

BOOKING DATE: **14/11/08** TIME (Hrs): **5.00pm**
MODE: ☒ SURFACE ☐ AIR
PUP BA CODE: **BOM-12**
DLY BA CODE: **BOM-12**
ACTUAL WT (KGS): **181KGS** CHARGED WT (KGS): **181KGS**
DETAILS: **181KGS** AMOUNT RS: **181KGS**
FREIGHT: **181KGS**
EXCHARGE: **181KGS**
COD/DOD CHG: **181KGS**
DIPLMAT CHARGES: **181KGS**
OTHER CHARGES: **181KGS**
TOTAL SERVICE CH: **100**
DOCKET CHARGES: **150**
20% FUEL & CHARGE: **60**
ST MANAGEMENT CH: **60**
SUB TOTAL: **370**
SERVICE TAX @ **370**
TOTAL: **370**
BILLING STATION: **TBB**
TO PAY: **370**
PAID: **370**
TBB: **370**
SIGNATURE: **[Signature]**

IF UNDELIVERED PLS. CALL 1800-180-0777