

5593

GUEST EXPRESS TRANSPORT LTD

UNIT 2, COLINDALE RD, COLNBROOK, BERKS, SL30HQ
01784 250016 OR INFO@GUESTEX.COM



DRIVER: SAM
VEHICLE: V14 SET
TRAILER:
CUSTOMER:

DELIVERY NOTE
DATE: 24-9-20
OUR REF:
CUSTOMER REF:

COLLECTION ADDRESS:	DELIVERY ADDRESS
PEI PHARMA	Quick Int
WESTERN AVE	PRESCOTT RD
BRIDSEND	CORNBUOK



COMMENTS:

WEIGHT: SIGN: SA PIECES: 3 PLS CUBE: SAM GILBERT
DATE: 24/9/20 TIME: 16:30

		Dallas (972) 869-9933 (800) 659-4339 Chicago (312) 243-9797 (800) 473-4673 Los Angeles (310) 414-9211 (800) 788-4529 Stat (718) 995-3616 (800) 856-7828 New York (718) 995-3616 (800) 488-4400 U.K. +44 20 8757 7500		192550471C  * 1 9 2 5 5 0 4 7 1 C *	
Bill Shipper Acct No. LHRVP Shippers Reference 192550471C		Bill Consignee Acct No.		Bill Other Acct No.	
PICK-UP Agent Date Time		DELIVERY INFO. Agent Date Time			
QUICK INTL COURIERS WILL MEAKINS UNIT 1 & 2 PRESCOTT ROAD COLNBROOK SLOUGH COLNBROOK, BERKS SL3 0AE UNITED KINGDOM 011-44-208757-7500		PCI PHARMA SERVICES PCI 2-3. UNIT 2100 WESTERN AVENUE BRIDGEND INDUSTRIAL ESTATE BRIDGEND CF31 3TY UNITED KINGDOM ATTN: PHONE:			
Description/Commodity EMPTY KITS		Pcs. 53	Wgt 938.5 kg dim: 938.5	<input type="checkbox"/> Basic \$200.00 Insurance <input type="checkbox"/> Shipper waives Insurance	Please initial here for additional Insurance <input type="checkbox"/> Commercial invoice to be completed by shipper
				Insurance 0.00 GBP Customs 0.00 GBP	
Shipper certifies that the commercial value, nature of the goods, and content are true and correct, assumes responsibility for charges and agrees to conditions.					
Special Instructions		In compliance with Part 109, please complete security endorsement I certify that this shipment does not contain any unauthorized explosive or destructive devices or hazardous material. I consent to a search of this shipment. I am aware that this endorsement & original signature along with other shipping docs will be retained on file until the shipment is delivered. <input checked="" type="checkbox"/>			
Shipper's Signature	Consignee's Signature Received in good condition except as noted		Shipper's signature Date First ID Type Photo <input type="checkbox"/> Yes <input type="checkbox"/> No Number		
Date and Time	Date and Time 24 Sep 2020 1130		Second ID Type Photo <input type="checkbox"/> Yes <input type="checkbox"/> No Number		
<input type="checkbox"/> Agent check box if inspected					



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Description/Commodity EMPTYKITS		Pcs. 22		Wgt 376 kg dim: 376	
		<input type="checkbox"/> Basic \$200.00 Insurance <input type="checkbox"/> Shipper waives Insurance		Please initial here for additional Insurance <input type="checkbox"/> Commercial invoice to be completed by shipper	
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