



Order ID: 1582

Master :2830810136661

Master

2830810136661

Box: 1/1

STORE CODE:

, Pin: 302022 null

NSZ

ROCKETBOX B2B

Shipping address :

PARAG, DEPT JAP/CLP31 AIPUR PLANT, P663., RIICO INDUSTRIALAREA SITAPURA, Pin: 302022

NΑ

Return address :

ROCKETBOX B2B.G-21, VARDHAMAN CITY PLAZA 2, GROUND FLOOR, TURKMAN GATE.Delhi.Delhi.110002.





Order ID : DOC_220122463

Master :2830810136661

Child



283 081 013 6663

Document

STORE CODE:

, Pin: 302022 JAI/SEI

NSZ

ROCKETBOX B2B

Shipping address:

PARAG.DEPT JAP/CLP31 AIPUR PLANT.P663.. RIICO INDUSTRIALAREA SITAPURA, Pin: 302022

Document

Return address :

ROCKETBOX B2B.G-21, VARDHAMAN CITY PLAZA 2, GROUND FLOOR, TURKMAN GATE, Delhi, Delhi, 110002.

| DELHIVELY | | | | | |
|--|------------------------------|-------------------------------|---|--|--|
| Small World ROCKETBOX B2B | | Date: 13/01/22 | 2830810136661 | | |
| 1.FROM: Drop-off: | | 4. TO: | Self Collect : | | |
| Shipper's Name: ROCKETBOX Shipper's Phone Number: 931 | | | Recipient's Name: PARAG Recipient's Phone Number: 79 | 076045755 | |
| | AN CITY PLAZA 2, GROUND FL | OOR, TURKMAN GATE | - | 1 AIPUR PLANT.P663,, RIICO INDUSTRIALAREA SITAPURA | |
| City: New Delhi | State: Delhi | Postal Code: 110002 | City: Jaipur | State: Rajasthan Postal Code: 302022 | |
| 2. SHIPMENT INFORMATION | | · | Client/Store/Address Code: | | |
| SHIPPER'S REFERENCE NO. (25 characters):1582 INVOICE NO.: 1582 EWBN: | | 5. MOT: | 6. SPECIAL HANDLING: FRAGILE HEAVY (>30 KG) DG. | | |
| TOTAL INVOICE VALUE:48910.00 Mass | | Master Id : 2830810136661 | GROUND | VAL CARGO. | |
| # BOXES x DIMENSION (LxWxH) cm | # COMMODITY DESCRIPTION | TOTAL WEIGHT | POD on Invoice | | |
| 1:74.0x54.0x70.0 | NA NA | 21.0 | 7. INSURANCE: FOV. MARINE. VALUE: | 8. PAYMENT: TRANSPORT: SHIPPER | |
| TOTAL NUMBER OF BOXES: ODCUMENT RECEIVED: INVO | _ | () OTHERS () | 9. REQUIRED SIGNATURE - D RECIPIENT'S SIGNATURE AN | | |
| 3. REQUIRED SIGNATURE - ORIGIN: DELHIVERY EMP ID: SHIPPER'S SIGN: | | | DATE TIME | | |
| DELHIVERY PVT. LTD. REGIS | TERED OFFICE: B244, OKHLA II | NUSTRIAL AREA PHASE 1, NEW DE | ELHI 110020, INDIA | | |

SHIPPER COPY

CONTACT NUMBER: +91 124 4623 200. CIN: U6309DL2011PTC221234, PAN: AAPCS9575E

| DELHIUECY Small World | КЕТВОХ В2В | Date: 13/01/22 | 2830810136661 | | | |
|---|--------------------------------|---------------------------|--|---|---------------------|--|
| 1.FROM: Drop-off: | | | 4. TO: | Self Collect : | | |
| Shipper's Name: ROCKETBOX B2B | | | Recipient's Name: PARAG | | | |
| Shipper's Phone Number: 9313007892 | | | Recipient's Phone Number: 7976045755 | | | |
| Street Name: G-21, VARDHAM | AN CITY PLAZA 2, GROUND FLOOR, | TURKMAN GATE | Street Name: DEPT JAP/CLP31 AIPUR PLANT.P663,, RIICO INDUSTRIALAREA SITAPURA | | | |
| City: New Delhi | State: Delhi | Postal Code: 110002 | City: Jaipur | State: Rajasthan | Postal Code: 302022 | |
| 2. SHIPMENT INFORMATION | | I . | Client/Store/Address Code: | | | |
| SHIPPER'S REFERENCE NO. (| (25 characters):1582 | | 5. MOT: | 6. SPECIAL HANDLING: | | |
| INVOICE NO.: 1582 | | EWBN: | Air 🔲 | FRAGILE HEAVY (>30 KG | G) DG. | |
| TOTAL INVOICE VALUE:48910 | 0.00 | Master Id : 2830810136661 | GROUND | VAL CARGO. | | |
| # BOXES x DIMENSION (LxWxH) cm | # COMMODITY DESCRIPTION | TOTAL WEIGHT | POD on Invoice | <u> </u> | | |
| 1:74.0x54.0x70.0 | NA NA | 21.0 | 7. INSURANCE: FOV. MARINE. VALUE: | 8. PAYMENT: TRANSPORT: SHIPPER DUTIES & TAXES: SHIPPER CASH ON DELIVERY COD AMOUNT CHEQUE ON DELIVERY CHEQUE BENEFICIARY'S NAME | JNT: ₹ | |
| TOTAL NUMBER OF BOXES: ODCUMENT RECEIVED: INVOING. OF DOCUMENTS: 3. REQUIRED SIGNATURE - O | ICE () TAX FORMS (|) OTHERS () | 9. REQUIRED SIGNATURE - D RECIPIENT'S SIGNATURE AN | D STAMP: | | |
| DELHIVERY EMP ID: | | ····· | | | | |

DELHIVERY PVT. LTD. REGISTERED OFFICE: B244, OKHLA INUSTRIAL AREA PHASE 1, NEW DELHI 110020, INDIA

CONTACT NUMBER: +91 124 4623 200. CIN: U6309DL2011PTC221234, PAN: AAPCS9575E

FOR TERMS & CONDITIONS, VISIT www.delhivery.com

ORIGIN/ACCOUNTS COPY

| DELHIUETY Small World ROC | CKETBOX B2B | Date: 13/01/22 | 2830810136661 | |
|---|-----------------------------|----------------------------------|---|---|
| 1.FROM: Drop-off: | | 4. TO: | Self Collect : | |
| Shipper's Name: ROCKETBO Shipper's Phone Number: 93 | | | Recipient's Name: PARAG Recipient's Phone Number: 79 | 976045755 |
| | MAN CITY PLAZA 2, GROUND FL | LOOR, TURKMAN GATE | - | 31 AIPUR PLANT.P663,, RIICO INDUSTRIALAREA SITAPURA |
| City: New Delhi | State: Delhi | Postal Code: 110002 | City: Jaipur | State: Rajasthan Postal Code: 302022 |
| 2. SHIPMENT INFORMATION | | | Client/Store/Address Code: | |
| SHIPPER'S REFERENCE NO. (25 characters):1582 INVOICE NO.: 1582 EWBN: TOTAL INVOICE VALUE:48910.00 Master Id: 2830810136 | | EWBN : Master Id : 2830810136661 | 5. MOT: Air GROUND | 6. SPECIAL HANDLING: FRAGILE HEAVY (>30 KG) DG. VAL CARGO. |
| # BOXES x DIMENSION (LxWxH) cm | # COMMODITY DESCRIPTION | TOTAL WEIGHT | POD on Invoice | |
| 1:74.0x54.0x70.0 | NA NA | 21.0 | 7. INSURANCE: FOV. MARINE. VALUE: | 8. PAYMENT: TRANSPORT: SHIPPER |
| TOTAL NUMBER OF BOXES: DOCUMENT RECEIVED: INVO No. Of DOCUMENTS: | | () OTHERS () | 9. REQUIRED SIGNATURE - D RECIPIENT'S SIGNATURE AN | |
| 3. REQUIRED SIGNATURE - ORIGIN: DELHIVERY EMP ID: SHIPPER'S SIGN: | | | DATE TIME | |
| DELHIVERY PVT. LTD. REGI: | STERED OFFICE: B244, OKHLA | INUSTRIAL AREA PHASE 1, NEW DE | :LHI 110020, INDIA | |

REGULATORY COPY

CONTACT NUMBER: +91 124 4623 200. CIN: U6309DL2011PTC221234, PAN: AAPCS9575E

| DELHIUELY Small World ROCKE | твох в2в | Date: 13/01/22 | 2830810136661 | | |
|---|-------------------------------|----------------------------|--|--------------------------------------|--|
| 1.FROM: Drop-off: | | | 4. TO: | Self Collect : | |
| Shipper's Name: ROCKETBOX I | 32B | | Recipient's Name: PARAG | | |
| Shipper's Phone Number: 93130 | 007892 | | Recipient's Phone Number: 7976045755 | | |
| Street Name: G-21, VARDHAMAN CITY PLAZA 2, GROUND FLOOR, TURKMAN GATE | | | Street Name: DEPT JAP/CLP31 AIPUR PLANT.P663,, RIICO INDUSTRIALAREA SITAPURA | | |
| City: New Delhi | State: Delhi | Postal Code: 110002 | City: Jaipur | State: Rajasthan Postal Code: 302022 | |
| 2. SHIPMENT INFORMATION | | | Client/Store/Address Code: | | |
| SHIPPER'S REFERENCE NO. (2 | 5 characters):1582 | | 5. MOT: | 6. SPECIAL HANDLING: | |
| INVOICE NO.: 1582 | | EWBN: | Air | FRAGILE HEAVY (>30 KG) DG. | |
| TOTAL INVOICE VALUE:48910.0 | 00 | Master Id : 2830810136661 | GROUND | VAL CARGO. | |
| # BOXES x DIMENSION (LxWxH) cm | # COMMODITY DESCRIPTION | TOTAL WEIGHT | POD on Invoice | | |
| 1:74.0x54.0x70.0 | <u>NA</u> | 21.0 | 7. INSURANCE: FOV. MARINE. VALUE: | 8. PAYMENT: TRANSPORT: SHIPPER | |
| TOTAL NUMBER OF BOXES: 1 DOCUMENT RECEIVED: INVOICE No. Of DOCUMENTS: | EE () TAX FORMS (| () OTHERS () | 9. REQUIRED SIGNATURE - DE RECIPIENT'S SIGNATURE AND | | |
| 3. REQUIRED SIGNATURE - ORIGIN: DELHIVERY EMP ID: SHIPPER'S SIGN: | | | DATE TIME | | |
| DELHIVERY PVT. LTD. REGISTE | ERED OFFICE: B244, OKHLA INUS | TRIAL AREA PHASE 1, NEW DE | LHI 110020, INDIA | | |

LM POD

CONTACT NUMBER: +91 124 4623 200. CIN: U6309DL2011PTC221234, PAN: AAPCS9575E

| DELHIUECY Small World | CKETBOX B2B | Date: 13/01/22 | 2830810136661 | | |
|---|--------------------------------|-------------------------------|---|--|--|
| 1.FROM: | | | 4. TO: | Self Collect : | |
| | | | | | |
| Shipper's Name: ROCKETB | OX B2B | | Recipient's Name: PARAG | | |
| Shipper's Phone Number: 9313007892 | | | Recipient's Phone Number: 7976045755 | | |
| Street Name: G-21, VARDHA | AMAN CITY PLAZA 2, GROUND FLO | OOR, TURKMAN GATE | Street Name: DEPT JAP/CLP3 | 1 AIPUR PLANT.P663,, RIICO INDUSTRIALAREA SITAPURA | |
| City: New Delhi | State: Delhi | Postal Code: 110002 | City: Jaipur | State: Rajasthan Postal Code: 302022 | |
| 2. SHIPMENT INFORMATION | N | <u> </u> | Client/Store/Address Code: | | |
| SHIPPER'S REFERENCE NO |). (25 characters):1582 | | 5. MOT: | 6. SPECIAL HANDLING: | |
| INVOICE NO.: 1582 | | EWBN: | Air 🔲 | FRAGILE HEAVY (>30 KG) DG. | |
| TOTAL INVOICE VALUE:489 | 010.00 | Master Id : 2830810136661 | GROUND | VAL CARGO. | |
| # BOXES x DIMENSION (LxWxH) cm | # COMMODITY DESCRIPTION | TOTAL WEIGHT | POD on Invoice | | |
| 1:74.0x54.0x70.0 | <u>NA</u> | 21.0 | 7. INSURANCE: FOV. MARINE. VALUE: | 8. PAYMENT: TRANSPORT: SHIPPER | |
| TOTAL NUMBER OF BOXES DOCUMENT RECEIVED: INV No. Of DOCUMENTS: | _ |) () OTHERS () | 9. REQUIRED SIGNATURE - D RECIPIENT'S SIGNATURE AN | | |
| 3. REQUIRED SIGNATURE - ORIGIN: DELHIVERY EMP ID: SHIPPER'S SIGN: | | | DATE TIME | . | |
| DELHIVERY PVT. LTD. REG | ISTERED OFFICE: B244, OKHLA IN | IUSTRIAL AREA PHASE 1, NEW DE | ELHI 110020, INDIA | | |

RECIPIENT COPY

CONTACT NUMBER: +91 124 4623 200. CIN: U6309DL2011PTC221234, PAN: AAPCS9575E