

aramex



* 411 589 591 22 *

Copy 4
Domestic Waybill

| 1. SHIPMENT INFORMATION | | | | | معلومات الشحنة | |
|--|------------------------------------|----------------------------|-----------------------------|------------------------|--|--|
| ORG. STN م | DEST. STN الـ | Product Type نوع الطرود | No. of Pieces عدد الطرود | Actual Weight الوزن | Chargeable Weight الوزن المستخدم لحساب الكلفة | |
| 2. FROM (SHIPPER) | | | | | | |
| Shipper's Account No. 131892 | | رقم حساب المرسل | Shipper's Ref. | | مرجع المرسل | |
| Contact Name (Your Name) من (المرسل) | | | Phone No. 94117463463 | رقم الهاتف | | |
| Company Name Makeen Books (Pvt) Ltd | | | Area Code | | Local No. | |
| Address No 441, Galle Road | | | العنوان | | | |
| City Colombo 03 | State/Province الولاية/المقاطعة | ZIP/Postal Code 00300 | | الرمز البريدي | | |
| 3. SHIPPER'S SIGNATURE & AUTHORIZATION | | | | | | |
| I/We agree that Aramex's standard Conditions of Carriage apply to this shipment and limit Aramex's liability. The Warsaw Convention may also apply (see reverse). I/We understand that Aramex's does not transport cash or dangerous goods (see reverse). | | | | | | |
| Shipper's Signature X | Date التاريخ | Time HH / MM | | توقيع المرسل | | |
| Received by Aramex | Date التاريخ | Time HH / MM | | استلمت من قبل أرامكس | | |
| 4. TO (RECEIVER) | | | | | | |
| Receiver's Account No. | | رقم حساب المستلم | Receiver's Ref. | | مرجع المستلم | |
| To (Receiver Name) | | | Area Code | Local No. | | |
| Company Name | | | الشركة (المستلم) | | | |
| Address | | | العنوان | | | |
| City | State/Province | ZIP/Postal Code | | الرمز البريدي | | |
| 5. DESCRIPTION OF GOODS | | | | | | |
| Declared Value | | بمه المصرح بها | | | | |
| 6. NOTES | | | | | | |
| 7. PRODUCT CLASSIFICATION | | | | | | |
| <input type="checkbox"/> Same Day نفس اليوم <input type="checkbox"/> Overnight اليوم التالي <input type="checkbox"/> Deferrec مؤجل | | | | | | |
| 8. ADDITIONAL SERVICES | | | | | | |
| <input type="checkbox"/> Return Service مة الإرجاع <input type="checkbox"/> Cost of Goods ثة البضاعة <input type="checkbox"/> Other ر ذلك | | | | | | |
| 9. TRANSPORTATION CHARGES | | | | | | |
| <input type="checkbox"/> Bill Shipper حساب المرسل <input type="checkbox"/> Bill Receiver (Collect) حساب المستلم <input type="checkbox"/> Bill 3rd Pa باب طرف ثالث <input type="checkbox"/> Account No. رقم الحساب <input type="checkbox"/> Prepaid مدفوع مسبقا <input type="checkbox"/> Cash Amount / القيمة | | | | | | |
| 10. COST OF GOODS | | | | | | |
| <input type="checkbox"/> Cash <input type="checkbox"/> Check شيك <input type="checkbox"/> Other غير ذلك Amount / القيمة | | | | | | |
| 11. RECEIVER'S SIGNATURE & AUTHORIZATION | | | | | | |
| Received shipment in good order and condition | | | | | | |
| Receiver's Signature X | Date التاريخ | Time HH / MM | | توقيع المستلم | | |
| Name (Please Print) | اسم المستلم | | | | | |