



DTDC Express Limited
 Regd. Office: No-3, Victoria Road
 Bengaluru - 560047

ORIGIN

DEST.

POUCH NO.

DATE

27/9/23

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No Negotiable Consignment Note / Subject to Bengaluru Jurisdiction.

The consignment note is not a tax invoice. A tax invoice will be made available by DTDC or its channel partner as the case may be, upon request.

1 Sender's (Consignor) Name: Mr. Saicharan

2 Recipient's (Consignee) Name: Mr. Rakesh

Company Name & Address:

Company Name & Address:

City: State: PIN Code:

City: Pune State: Alloia PIN Code:

Sender's GSTIN*:

Recipient's GSTIN*:

| | | | | |
|--|--------|--------|------|------------------------------|
| 3 Nature of consignment / Dox <input type="checkbox"/> Non-Dox <input checked="" type="checkbox"/> | | | | Total Num Pcs: |
| DIM 1: L | cm X B | cm X H | cm X | Pcs |
| DIM 2: L | cm X B | cm X H | cm X | Pcs |
| DIM 3: L | cm X B | cm X H | cm X | Pcs |
| | | | | Actual Wt.: kg |
| | | | | Volumetric Wt.: <u>ND</u> kg |
| | | | | Chargeable Wt.: kg |

4 Description of Content

Total Value of consignment for carriage / E-Way bill

₹

5 Paper Work Enclosures

6 Type of consignment / Commercial Non Commercial

7 Value Added Services

SECURE PACK

CN Expiry Date

10 I/We declare that this consignment does not contain personal mail, cash, jewellery, contraband, illegal drugs, any prohibited items and commodities which can cause safety hazards while transporting

| | |
|--------------------------------|------------|
| 9 Charges | Amount (₹) |
| a) Tariff (incl. of FSC+GST) | |
| b) Value Added Service Charges | <u>630</u> |
| c) Risk Surcharge | |
| d) Total amount (a+b+c) | |

8 Mode / Surface Air Cargo Express

Sender's Signature & Seal

16/10/23

Above charges are inclusive of GST & other taxes if applicable

Mode of Payment

Cash Card Wallet

Consignment Number:

D71532541

I have read and understood terms & conditions printed overleaf of this consignment note and I agree to the same

11 Booking Branch / Franchisee Code

Courier Signature

12 Risk Surcharge

Owner

Carrier

13 Receiver's Name:

Relationship:

Company Stamp & Signature:

Ph No.:

Date: / / Time AM/PM