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Gereral shipment order form for Airfreight Express Global GmbH

cereral simplificate order form.	ior / iii ii cigire Express ciosar cirisri
contractor data / recipient of	f the invoice*
company name:	
address:	
address:	
postal code/ city	
phone.:	contact partner:
st if invoice address is different, please use se	separate form
company data from the recipi company name:	ient
address:	
address:	
Postal code/ city	
phone:	contact partner:
priorier	contact partition
details of shipping product*	
number of packages:	total weight:
dimensions (lxwxh):	total value:
content:	
secured	unsecured
* for more than one package please use sep	parate form
pick-up date	
date:	time:
delivery date	
date:	time:
	the mentioned goods to the specified recipient
Previous we checked if the obligation	• -
We have read and accepted the gen	
We are responsible for the policies of	
We will pay without any deduction v	within 7 days of the invoice date.
place / date:	
place / date:	
name / signature / stamp:	
position within the company:	