



CUSTOMER COPY

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BC

CONSIGNEE

Charge Account No. 100992

Special Instructions: _____

Shipper's Signature Over Printed Name

Cashier/Collector Name

PAYMENT

Delivery Branch: _____

Total Amount: _____

145 Michelle B. Tuyen 9/16

SUBJECT TO CONDITIONS AT THE BACK HEREOF

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TRACKING NUMBER

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Total Amount: _____

INSPECTED

145 *OPr* 9/16
Michelle B. Tuvan
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INSPECTED

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145 Michelle B. Tuvan 9/16

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Owned & Operated by
JRS BUSINESS CORPORATION
Operating Under Rep. Act. 3260
VAT REG. TIN 000-056-694-027
Rm. 414 G/F Regina Bldg. Escolta Street
Brgy. 291 Zone 027 Binondo Manila
Tel. No. (02) 8243-8404; 8244-6511; 8241-6350; 8241-6550
CP No. 09338206201-094799940000
E-mail: jrsmain@jrs-express.com
Website: www.jrs-express.com

**WAYBILL****CHARGE****CUSTOMER COPY**

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SHIPPER INFORMATION

Date: 9/9/2022 Origin: Escolta
Client Type: Charge Services: Express Service
Package Type: General Cargo
Weight: 100.00 Grams
Description / Content: Documents
Destination: Puerto Princesa City, Palawan
Shipper's Name: Department of Environment and Natural Resources (DENR)
Shipper's Address: Building/Street
Contact Number: Mobile
Charge Account No. 100992

WAIVER OF RIGHTS

After being informed of my right to declare the amount of the shipment and having opted not to do so, I hereby waive my right to claim its actual value in the event of loss or damage of my cargo.

I hereby declare that the content of my shipment conforms with the restrictions being implemented by JRS BUSINESS CORPORATION in accordance with the laws of the Republic of the Philippines.

CONFORME:

Shipper's Signature Over Printed Name

RECEIVED FOR JRS

Cashier/Collector Name

CONSIGNEE

Name: DENR PENRO PALAWAN
Address: STA MONICA Puerto Princesa City, Palawan
639999350639
Contact #: _____
Special Instructions: _____

RECEIVED IN GOOD ORDER AND CONDITION

Received by: _____
Signature: _____
Date Received: _____
Time: _____
Relationship to Addressee: _____
Delivered by : _____
Delivery Branch: _____

PAYMENT

Freight Charge: 160.00
Valuation: 0.00
Insurance: 0.00
Pick-up Fee: 0.00
JRS Box: 0.00
Others: 160.00
Total Amount: _____

INSPECTED160 Michelle B. Tuván 9/16
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CHARGE
CUSTOMER COPY

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SHIPPER INFORMATION

Charge Account No. 100992

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Shipper's Signature Over Printed Name

RECEIVED FOR JRS

Cashier/Collector Name

CONSIGNEE

Special Instructions:

RECEIVED IN GOOD ORDER AND CONDITION

Delivery Branch: _____

PAYMENT

INSPECTED

145 Michelle E. Tuyen 9/16
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