



SAP DOCUMENT NUMBER

ECRS 315288

CNR. MOORE & LANTERN STREET WADEVILLE 1422

PO BOX 14090 WADEVILLE 1422

TEL: (011) 821-8200 FAX: (011) 827-4429

REG. No. / REG. Nr. 1963/001333/06 VAT No. / BTW Nr. 4780109106

EMPTY CONTAINER RECEIPT SLIP

Customer/Supplier Name: SHOPRITE Date: 10/01/25 SAP Document No.:
Customer Number/Shipmen Number: 63877020 Cage No: Outside SAP Correction No.:
Vehicle Registration: HZ 812 B Time: 11 H07 Processed By:

TYPE BOTTLEDEALER SHIPMENT BULK

Table with columns: MATNR, Description, Quantity. Includes sections for DG01 UNSORTED BOTTLES, DG02 - EMPTY RETURNABLE DRY GOODS, and various bottle types like Bot 4.5 Ropp Jar Uns, Bot 2.0 Ropp Jar Uns, etc.

Table with columns: MATNR, Description, Quantity. Includes sections for DG03 - SORTED BOTTLES and various bottle types like Bot 0227 2.0 Flint Ropp OBS Jar Srt, Bot 0227 2.0 Gm Ropp Tasbrg Jar Srt, etc.

By signing this document you are confirming that you have physically checked the stock and agree that the recorded quantities are a true reflection of the delivered goods.

Physically Received and Checked by: LAURENCE

EMPLOYEE NUMBER: N1159391

Employee Name:

Third Checker:

OTHER

TOTAL PACKAGES 2880

Verified by Security Checker: [Signature]

Security Name: [Signature]

Driver's Signature: [Signature] Driver Name: MUSA



CSR-rd001  
CRACC  
09/01/2025 16:14

Despatch No: 3607 CENTURION FG

Customer: V152033 HEINEKEN BEVERAGES (SOUTH AFRICA)  
Route: 92 Stop: 10 Status: CLL  
Truck / Container Type: Trailer  
Carrier: CARL  
Seal No:

MANAGER (PRINT)  
DRIVER'S NAME AND SURNAME (PRINT):

*Renard*  
*S.A. HAZIPURU*  
*1195069*

GATE PASS NO:

DIGN  
SIGN

TRUCK REGISTER

*1157 812 FS*

Range: Mariner, Crispella

Distribution Center: Makabende  
Rd 92  
Rivonia

Customer Number: 86070002445  
Equipment Number: 86070002445  
Issue Date: 2025-08-15  
Issue Status: OK

TYPE OF PERSON:

*LAURENCE A 1010165*

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| SHORTEENERS<br>RETURNS CENTRE CENTURION FG                                   |
| THIS SIGNATURE IS NOT VALID FOR CLAIMS AND RETURNS. PROTECT IT AT ALL TIMES. |
| CLAIM NUMBER: <i>21416</i> DATE OF THIS LOSS: <i>2025-08-15</i>              |
| CLAIM TYPE: <i>Damage</i> GATE PASS NUMBER: <i>1195069</i>                   |
| NUMBER OF PALLETS: <i>26</i> Pallets and 2200L                               |
| NAME OF RECEIVER: <i>Carl</i>  |
| SUPPLIER NAME: <i>Heineken</i>   |
| REGISTRATION NUMBER: <i>1157 812 FS</i>                                      |
| MANAGER NAME: <i>Renard</i>  |
| MANAGER SIGNATURE: <i>[Signature]</i>  |

*distillering crates*