

Mooiuitsig Wynkelders (Pty) Ltd
P.O. Box 15, Bonnievale, 6730

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Co Reg No: 1947/026984/07
VAT No: 4390103929
Liquor Lisense: RG689/RG688/RG687



Customer:
Tops Uitzicht (36126)
Po Box 18294 Wynberg Bellville
Wynberg
Bellville

Credit Note

Document No: CRN164612
Ext. Order No.: claim859652
Date: 13/08/2024
Account: KTOP047
Page: 1 of 1

VAT No: 4900268881

Prod No	Description	Quantity	UOM	Unit Price	Disc %	VAT %	Total (Excl)
32830	Rusthof Blanc de Blanc BOX 5lt	1.00	1x5lt	112.70		15.00	112.70

Total Weight: 24 kg

Total: (Excl.) R 112.70
VAT Amount R 16.91
Total: (Incl.) R 129.61
Total outstanding on account R 46,004.39

REQUEST FOR CREDIT - CR14203052024-08-13 11:33:28

LOAD SHEET Reference - LSID 233939, DATE Delivered - 2024-08-12

Reg. No.	Truck Description	Load Capacity	Driver Name	Dispatcher	Checker
FZW618FS	FUSO CANTER FE7-13 4		Z.J. PEDRO		

Reason for Credit:Leakage

Brief Description of Credit:

Principal Customer Code:UPLIFTMENT

Customer Name:TOPS ATT SPAR UITZITCH

Doc. Date: 2024-08-08 Doc. Ref: UPLB3-76MOO GRV: A859652 Credit Type: Upliftment Invoice Amt: R 0

Stock Code	Stock Description	Unit	Packsize	Reason Code	Reason	Batch	QTY
A32830U	RUSTHOF BLANC DE BLANC BOX 5LT	EA	1 x 5L	R5	Leakage		1

Total Number of Items to be credited on Document Ref: UPLB3-76MOO (1 Product Type)1

BONNIEVALE

Upliftment Sheet L/RUNNERS C.T.

[illegible]

Ref-Bramm - 0845178174.

SIGNATURE :

PRODUCT CODE	CASES	UNITS	REASON
32830		1	damaged stock
			dca 12980

Chains 859652

Spar Uitzicht & Tops
RECEIVED
12 AUG 2024
Signature: *Elbraley*

PLEASE QUOTE THE CLAIM No. ON YOUR CREDIT NOTE

STORE DROPSHIPMENT CLAIMS ONLY

SUPPLIER NAME MacIntosh
ADDRESS P.O. Box 15
Bonnievale 6730
TEL NO: (023) 6162443

STORE NAME Spar Uibacht STORE CODE 36126

TOWN clo Vatica n Sicily

STORE TEL (001) 9752473 DATE 12/08/24

SUPPLIER INV NO.
 SUPPLIER INV. DATE: (Use a separate claim per supplier invoice)

[illegible]

GOODS HANDLED TO: SAROBUS (PRINT NAME)
SIGNATURE: [Signature] DATE: 12-10-24
VEHICLE REG. NO: 6W61879 (NBI)

CLAIM PREPARED BY: CSmiley

SIGNATURE: Shirley

RECORD OF CONTACT WITH SUPPLIER: (STORE MUST FOLLOW UP BEFORE SUBMITTING TO D.C.)

[illegible]

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1. Original to Supplier 2. Store file copy 3. DC copy (if reqd)