



SIGNAL HILL PRODUCTS

Signal Hill Products (Pty) Ltd
166 Gunners Circle
Epping 1
Cape Town, WC, 7460
Phone: +27 (0) 21 203 2490
Email: debtors@signalhillproducts.com
Web: http://www.signalhillproducts.com

Tax Invoice

Reference No.: IN141296
Date: 23-Oct-2024
Due Date: 30-Nov-2024
Customer ID: C5635
Currency: ZAR
Customer VAT #: 4420106777
Source: LRF000

BILL TO:		SHIP TO:
Shoprite Holdings Ltd Shop D8, Watergate Mall Cnr AZ Berman Drive & R300 Mitchell's Plain WC 7786 SOUTH AFRICA		SHIP VIA: LRSAC Shoprite Liquorshop - Watergate_92635 Shop D8, Watergate Mall Cnr AZ Berman Drive & R300 Mitchell's Plain WC 7786 SOUTH AFRICA
CUSTOMER REF. NUMBER	TERMS	CONTACT
1163541960	2.5% 30 days from Statement	

SO TYPE		SO NUMBER	SHIPMENT NUMBER			CUSTOMER P.O. NO.	
SO		SO133629	SS160591			1163541960	
No.	ITEM	QTY.	UOM	UNIT PRICE	DISC %	DISC AMT	EXTENDED PRICE
1	FG CD-047: Strongbow Red Berries Cider - 12 x 660ml RB (4.5% ALC/VOL)	6.0000	CASE	216.5200	0%	0.00	1,299.12
2	RT PA-035: Returnable Crate with Bottles – 12 x 660ml - Deposit	6.0000	UNIT	31.3200	0%	0.00	187.92
3	FG CD-051: Strongbow Gold Cider - 12 x 660ml RB (4.5% ALC/VOL)	5.0000	CASE	216.5200	0%	0.00	1,082.60
4	RT PA-035: Returnable Crate with Bottles – 12 x 660ml - Deposit	5.0000	UNIT	31.3200	0%	0.00	156.60

Driver:

Driver Signature:

Truck Reg:

Cust Received By:

Cust Signature

Date:

Liquor Runner Cape Town (Pty) Ltd
is a registered National Distributor
REG. NO. RG004327

Settlement Discount: R 68.47

Note: Please note settlement discount doesn't include returnable items.

Sales Total: 2,726.24

Tax Total: 408.94

Total (ZAR): 3,135.18

Standard Bank --- Account name: Signal Hill Products (Pty) Ltd --- Account number: 000895466 --- Branch code: 000205
Company Reg: 2013/035584/07 --- Company VAT: 4460259833 --- Customs Code: 21127081

Returns:

SHP 20L Keg	
SHP 30L Keg	
Strongbow Crates and Bottles	
Strongbow Crates only	
Chep exchanged/swopped with LR	
Chep returns for credit	



SHOPRITE WATERGATE (601301)

OWN No. 2174 DATE 24/10/2024

QUANTAGES: RETURNS:

AMOUNT: CLAIM No.:

EMPLOYEE No.:

SIGNATURE INVALID UNIT 23

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