

TRANSFER HIRE ADVICE NOTE

Sending Location Account Number

0

1

0

1

2

1

2

7

3

1

Sending Location Name

152

Sending Location Details

299 Parkway Road

Receiving Location Account Number										Receiving Location Details									
2	7	0	0	0	4	8	4	6	2	LR CPT Range & NoField									
Receiving Location Name										Receiving Location Details									
CNS																			

Reference Number 1	Reference Description
1056194016	
Reference Number 2	Reference Description
5704731271	
Reference Number 3	Reference Description

[illegible]

CHPEP never sells or transfers ownership of its Equipment. Unauthorised trading, appropriation, use or disposal of CHPEP equipment is strictly prohibited.

DELIVERY ADVICE

Sending Plant:	IS2 Isipingo Plant DBN 299 Refinery Road 4115 ISIPINGO SOUTH AFRICA
Shipping Point:	Isipingo
Warehouse Bond Nos:	

Receiving CN5
Plant: LR Cape Town
 c/o Range and Anfield Road,
 7599 CAPE TOWN
 SOUTH AFRICA

Shipment No:
Delivery No: 1056194096
Order Number: 5704731871

Warehouse Bond Nos:

Purchase Order No:

Haulier/Vessel:

Seal No:

Goods Issue Date: 25.08.2025

Customer Delivery Date: 29.08.2025

Receiving Plant Under Bond: ☐ Yes ☒ No

Shipping Instructions:

FIDELITY

Material	ABV%	Quantity UoM	Batch ID SLED/BBD	Supplying Plant Under Bond
796369 Bells Extra Spl 75cl 12X01	40.00	60 CAS	L52341F001 20.08.2030	☐ Yes ☒ No
796369 Bells Extra Spl 75cl 12X01	40.00	2,250 CAS	L52351F001 21.08.2030	☐ Yes ☒ No

*34 chp Pallets &
1 pallet Ingredients*

TIME CHECKED IN:	22:49
ENTER YARD:	22:59
START LOADING:	23:33
END LOADING:	00:07
TIME EXIT:	

TIME CHECKED IN:	
ENTER YARD:	
START LOADING:	
END LOADING:	
TIME EXIT:	

Declaration: We hereby declare the foregoing to be a full and true account of contents of Goods Described

Signature of sender: *Kim*

Signature of receiving site:

Date: 26 August 2025

Date:

LRSA SINGLE PICK SLIP FOR INTER BRANCH TRANSFER

2281

LR Cape Town IBT TO RECEIVE 33 PALLETES

1056194096/IS2/1056194096IBT

St Code	St Desc	Pack Size	Batch	Unit	Units QTY
---------	---------	-----------	-------	------	-----------

DIASA					
LR Cape Town IBT					

CS	2310				
796369	BELLS EXTRA SPECIAL 40% (12 X 750ML)	12 X 750ML	L52341F001	CS	60
796369	BELLS EXTRA SPECIAL 40% (12 X 750ML)	12 X 750ML	L52351F001	CS	2250
Total Cases:					2,310
Total Pallets:					33

Picked By: _____

Checked By: _____

Monday 25 August 2025

299 Refinery Dr
Sapref
Isipingo
4115



Shaun.munsami@lrsc.co.za

Liquor Runner - Isipingo Produc Isipingo

Http://www.lrsa.co.za

IBT INSTRUCTION / DISPATCH NOTE
CONSIGNEE - LR Cape Town IBT

DIASA

TOTAL QUANTITY FOR IBT: 0

PRINCIPAL REFERENCE NUMBER

Number of Chepp: 33 34

1056194096/IS2/1056194096IBT

IBT SPECIAL INSTRUCTIONS

Transport Company:

LR Primary

Driver Name:

JOHANNES MORGAN

Expected Delivery Date: 2025-08-29

Truck Reg Nr: JBB896FS

Transport Reference:
1056194096

Dispatch Date: 2025-08-26

Dispatch Time: 01:00

Driver Signature:

LR Signature:

No. of Seals	Received by Driver	Seal Number
1		0562661-0562670
2		0562671-0562680
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Deliveries ex - Isipingo Traceability

DIAGEO

Document No.
18-03-02 F2

Revision No:
5

Date Issued:
20 August 2010

South Africa

Start Time: 23:33

Finish Time: 00:07

Destination: L.R CAPE TOWN

Invoice No: 1056194096

Horse Reg: JBB 896 FS

Trailer 1: JBJ 167 FS

Trailer 2: JBJ 170 FS

	Product	SKU Number	Pallet No	Date	Batch Number	BB Date	Case Time
1	Bells Extra 750ml	796369	(cocoise) 600239892704071805	22 08 25	L5 2341 F001		23:19
2	Bells Extra 750ml	796369	600239892704070104	22 08 25	L5 2351 F001		17:29
3	"	"	113	22 08 25	L5 "		17:29
4	"	"	110	22 08 25	L5 "		17:29
5	"	"	112	22 08 25	L5 "		17:29
6	"	"	109	22 08 25	L5 "		17:29
7	"	"	111	22 08 25	L5 "		17:29
8	"	"	108	22 08 25	L5 "		17:29
9	"	"	114	22 08 25	L5 "		17:29
10	"	"	135	22 08 25	L5 "		19:03
11	"	"	139	22 08 25	L5 "		19:03
12	"	"	136	22 08 25	L5 "		19:03
13	"	"	134	22 08 25	L5 "		19:03
14	"	"	025	22 08 25	L5 "		12:42
15	"	"	027	22 08 25	L5 "		12:42
16	"	"	026	22 08 25	L5 "		12:42
17	"	"	153	22 08 25	L5 "		20:11
18	"	"	138	22 08 25	L5 "		19:03
19	"	"	137	22 08 25	L5 "		19:03
20	"	"	142	22 08 25	L5 "		19:03
21	"	"	140	22 08 25	L5 "		19:03
22	"	"	143	22 08 25	L5 "		19:03
23	"	"	146	22 08 25	L5 "		19:03
24	"	"	141	22 08 25	L5 "		19:03
25	"	"	145	22 08 25	L5 "		19:03
26	"	"	031	22 08 25	L5 "		12:42
27	"	"	028	22 08 25	L5 "		12:42
28	"	"	032	22 08 25	L5 "		12:42
29	"	"	029	22 08 25	L5 "		12:42
30	"	"	033	22 08 25	L5 "		12:42
31	"	"	163	22 08 25	L5 "		20:11
32	"	"	151	22 08 25	L5 "		20:11
33	"	"	034	22 08 25	L5 "		12:42
34	"	"	(cocoise) 804	23 08 25	L5 "		23:17
35					25 L5		
36					25 L5		

Checkers Name: Jerome

Transporter: L.R

Package Quality Evaluation Form Pre- Departure Ex Isipingo

DIAGEO

South Africa (Pty) Ltd

Document Number:
18-03-02 F1

Revision Number:
1

Date issued:
31 August 2016

Destination: **LR CPT**

27 AUGUST 2025

Number of Pallets:	34 + 1 PALLET INGREDIENTS
Horse Registration no:	JBB896FS
Trailer 1 Registration no:	JB1167FS
Trailer 2 Registration no:	JB1170FS
Drivers Name:	JOHANNES MORGAN

1. Shrink-film tightly secured on each pallet	Yes ☒	No ☐
2. Each pallet has a top cover.	Yes ☒	No ☐
3. All cases are free from damage.	Yes ☒	No ☐
4. Vehicle has been loaded according to specifications.	Yes ☒	No ☐

Should any of the above be answered as "NO" then the QA Manager is to be notified immediately and pass judgement pertaining to the release of the goods.

QA Comments _____

QA Manager's Signature : _____

Depot Controller's Signature : **KIM MANILAL**



Receiving Depot :

DEPOT:	
Number of Pallets received:	
Condition of Pallets:	
Condition of cases:	

Depot Manager's signature : _____ Date : _____

Please return this form should the number of pallets be short received or if the condition of the pallets/cases are unacceptable

Please return to

MSM

DIAGEO SA -ISIPINGO

Tel no. 031- 910 5052

BIDVEST PROTEA COIN (PTY) LTD	
DATE: <u>27/08/25</u>	TIME: <u>01:00</u>
OFFICER: <u>X Ngweni</u>	

C/o Range rd & Anfield rd
Blackheath
Kuilsrivier
Cape Town



C/o Range rd & Anfield rd
Blackheath
Kuilsrivier
Cape Town

(021) 903 3880

(021) 903 8874

Pieter@lrta.co.za

Liquor Runners Cape Town

[Http://www.lrsa.co.za](http://www.lrsa.co.za)

GRV for Diageo South Africa - LRSA NR: 14931 (GRV)

Receiver: Buhle Gxaba

Checker: Buhle Gxaba

Receive Date: 2025-08-29

Warehouse Isipingo

WarehouseRecv: Cape Town

Sender Ref 1: 1056194096/IS2/1056194096IBT

Sender Ref 2: 79334

Truck Reg: JBB896FS

Driver Name: Johannes Morgan

SKU Code	Stock Description	Bin	Batch	Expire Date	QTY(Cases)	QTY(Units)
Stock Received						
796369	BELLS EXTRA SPECIAL 40% (12 X 750M		L52341F001		56	672
796369	BELLS EXTRA SPECIAL 40% (12 X 750M		L52351F001		2254	27048
					2,310.00	27,720.00
				Total QTY Received	2,310.00	27,720.00

3 x Cases damaged
10 x Cases packaging

Checked By:

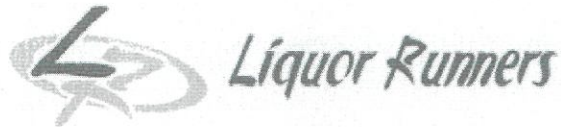
Transport Company:

Receiver Signature:_____

Driver Signature: _____

01/09/2025 01:32:13 PM

C/o Range rd & Anfield rd
Blackheath
Kuilsrivier
Cape Town



C/o Range rd & Anfield rd
Blackheath
Kuilsrivier
Cape Town

(021) 903 3880
Pieter@lrsc.co.za

Liquor Runners Cape Town

(021) 903 8874
Http://www.lrsa.co.za

GRV for Diageo South Africa - LRSA NR: 14931 (GRV)

Receiver: Buhle Gxaba
Checker: Buhle Gxaba
Warehouse: Isipingo
Sender Ref 1: 1056194096/IS2/1056194096IBT
Truck Reg: JBB896FS
Receive Date: 2025-08-29
Warehouse Recv: Cape Town
Sender Ref 2: 79334
Driver Name: Johannes Morgan

SKU Code	Stock Description	Bin	Batch	Expire Date	QTY(Cases)	QTY(Units)
Stock Received						
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796369	BELLS EXTRA SPECIAL 40% (12 X 750M		L52351F001		2254	27048
					2,310.00	27,720.00
Total QTY Received					2,310.00	27,720.00

3 x cases damaged
10 x cases packaging

#6149

Checked By: Buhle

Transport Company: LR Transport

Receiver Signature: _____

Driver Signature: _____

29/08/2025 09:25:21 AM

1/1

DELIVERY ADVICE

Sending Plant:	IS2 Isipingo Plant DBN 299 Refinery Road 4115 ISIPINGO SOUTH AFRICA
Shipping Point:	Isipingo
Warehouse Bond Nos:	

Receiving Plant: CN5
LR Cape Town
c/o Range and Anfield Road,
7599 CAPE TOWN
SOUTH AFRICA

Shipment No:

Delivery No: 1056194096

Order Number: 5704731871

Warehouse Bond Nos:

Purchase Order No:

Haulier/Vessel:

Seal No:

Goods Issue Date: 25.08.2025

Customer Delivery Date: 29.08.2025

Receiving Plant Under Bond: ☐ Yes ☒ No

Shipping Instructions:

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

Material	ABV%	Quantity UoM	Batch ID SLED/BBD	Supplying Plant Under Bond
796369 Bells Extra Spl 75cl 12X01	40.00	60 CAS 56	L52341F001 20.08.2030	[_] Yes [X] No
796369 Bells Extra Spl 75cl 12X01	40.00	2,250 CAS 2254	L52351F001 21.08.2030	[_] Yes [X] No

Declaration: We hereby declare the foregoing to be a full and true account of contents of Goods Described

Signature of sender:

Signature of receiving site: 

Date:

Date: 29/08/25



IBT INSTRUCTION / DISPATCH NOTE
CONSIGNEE - LR Cape Town IBT

DIASA	
TOTAL QUANTITY FOR IBT: 0	PRINCIPAL REFERENCE NUMBER
Number of Chepp: 33 34	1056194096/IS2/1056194096IBT
IBT SPECIAL INSTRUCTIONS	
Transport Company: LR Primary	Driver Name: JOHANNES MORGAN
Expected Delivery Date: 2025-08-29	Truck Reg Nr: JBB896FS
Transport Reference:	Dispatch Date: 2025-08-26
1056194096	Dispatch Time: 01:00
Driver Signature:	LR Signature:

No. of Seals	Received by Driver	Seal Number
1		0562661-0562670 ✓
2		0562671-0562680 ✓
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Package Quality Evaluation Form Pre- Departure Ex Isipingo

DIAGEO

Document Number:
18-03-02 F1

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South Africa (Pty) Ltd

Destination: **LR CPT**

27 AUGUST 2025

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Drivers Name:	JOHANNES MORGAN

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2. Each pallet has a top cover.	Yes ☒	No ☐
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4. Vehicle has been loaded according to specifications.	Yes ☒	No ☐

Should any of the above be answered as "NO" then the QA Manager is to be notified immediately and pass judgement pertaining to the release of the goods.

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QA Manager's Signature : _____

Depot Controller's Signature : **KIM MANILAL**



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DEPOT:	
Number of Pallets received:	
Condition of Pallets:	
Condition of cases:	

Depot Manager's signature : _____

Liquor Runner Cape Town (Pty) Ltd

Date : _____

Please return this form should the number of pallets be short received or if the condition of the pallets/cases are unacceptable

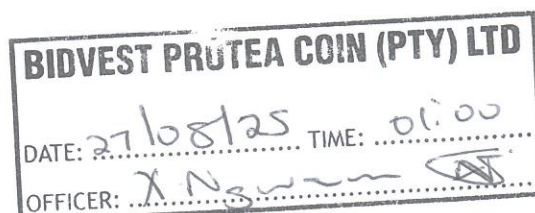
Please return to

MSM

DIAGEO SA -ISIPINGO

Tel no. 031- 910 5052

REG. NO. RG004327



74250377947

Days from Symptom Onset to Hospital Admission	% Discharged Home
0	~85%
1	~75%
2	~65%
3	~55%
4	~45%
5	~35%
6	~25%
7	~15%
8	~10%
9	~5%
10	~0%

[Faint, illegible handwritten notes]

0-5000

54

22

Prince & Moffatt

056194000

1150

5

[illegible]

100

52 80 62

James H. Jones

Figure 1 illustrates the sequence of strokes for writing the letter 'a'. The sequence starts with a single dot (1) and progresses through seven steps, showing the formation of the letter's shape and the direction of the pen strokes.

1. *Abstract* (100 words) – Summarize the purpose, methods, results, and conclusions of your study.

2. *Introduction* (200 words) – Provide background information on the topic and state the research problem.

3. *Methods* (200 words) – Describe the research design, participants, and procedures used in your study.

4. *Results* (200 words) – Present the findings of your study, including any statistical analyses.

5. *Discussion* (200 words) – Interpret the results, discuss their implications, and suggest future research.

6. *Conclusion* (100 words) – Summarize the main findings and their significance.

7. *References* (100 words) – List the sources cited in your paper.

8. *Appendices* (100 words) – Include any additional information, such as questionnaires or data tables.

9. *Tables* (100 words) – Present any data tables used in your study.

10. *Figures* (100 words) – Present any figures or graphs used in your study.

11. *Supplementary Materials* (100 words) – Include any additional materials, such as audio or video recordings.

12. *Keywords* (100 words) – Provide keywords for indexing and search purposes.

13. *Author Biographies* (100 words) – Provide brief biographies of the authors.

14. *Conflict of Interest* (100 words) – Disclose any potential conflicts of interest.

15. *Consent* (100 words) – Provide a statement of informed consent from the participants.

16. *Ethical Approval* (100 words) – Provide a statement of ethical approval from the relevant authority.

17. *Declaration of Competing Interests* (100 words) – Disclose any competing interests.

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ACCIDENT- INCIDENT INVESTIGATION FORM

HSE-INC-04

INCIDENT NUMBER: (Number as per Libra)

OB 6149

Detailed Information

Date	Time	Depot	Location of incident					
28.08.2025	14:26	Cape Town	Receiving Yard					
Depot Manager	Contact Details	National Risk/ SHEQ Manager	Contact Details					
Pieter Le Roux	0219038874	Delmi Oosthuizen	0714828974					
Classification	Near miss	☐	First Aid	☐	Medical treatment	☐	Hospitalization	☐
	Environmental incident	☐	Stock damage	☒	Truck accident	☐	LMV Accident	☐
	Property Damage	☐	Forklift Accident	☐	Quality	☐	Security Incident (specify)	☐

Incident description

Damage case

Detailed Event Description

While offloading JBB896FS we noticed 1 x pallet Bells Extra Special wet and leaking, Upon repacking the pallet the following was discovered

2x Damaged Bottles

34 x Label Damaged

120 x units needing new packaging

SKU 796369

Sto 1056194096

Batch L52351F001

Immediate Action Taken

Pictures Taken

Wet stock removed

Report on OB

Additional information to be included into report

Truck / Vehicle accidents	Driver statement		3 rd Party statement (if appl)		Video footage available	
	Case number		Drawing of accident scene		Photo's of accident scene	
	Driver's PrDP					
FLT accident	Breathalyzer test done		FLT driver license		Video footage available	
Injury	Training records		Induction		Video footage available	

REVISION NO: 05
DATE: 14/11/2024

LIQUOR RUNNERS

Page 1 of 5



ACCIDENT- INCIDENT INVESTIGATION FORM

HSE-INC-04

Event Causes (Root Cause/as per 5WHY assessment)

Why 1:	Damaged in transit
Why 2:	.
Why 3:	.
Why 4:	.
Why 5:	.

ROOT CAUSE	Damaged in transit
------------	--------------------

Event Corrective Actions/Preventative actions as per 5 WHY assessment	Date	Responsibility
n/a		
n/a		

Corrective Actions Verified, Approved and implementation ensured by

Name and Surname	Signature	Date	Position
n/a	n/a		

Incident status

OPEN		CLOSED	☒	
------	--	--------	-------------------------------------	--

Investigation Team

Name and Surname	Title	
Charles Hendricks	IBT Controller	

ANNEXURE

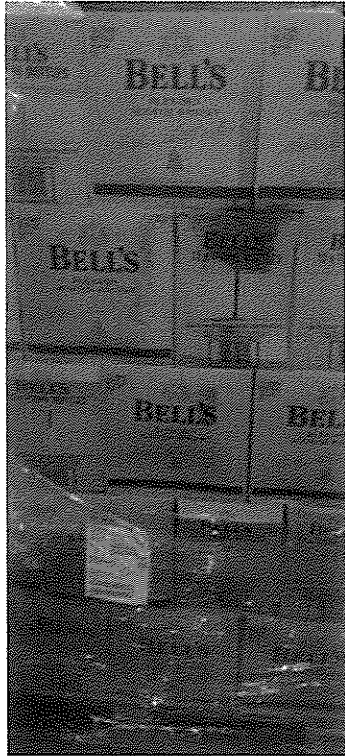
Statement	Licenses
-----------	----------



ACCIDENT- INCIDENT INVESTIGATION FORM

HSE-INC-04

ADD statement here



Add license here

Photos

Other

REVISION NO: 05
DATE: 14/11/2024

LIQUOR RUNNERS

Page 3 of 5



ACCIDENT- INCIDENT INVESTIGATION FORM

HSE-INC-04



REVISION NO: 05
DATE: 14/11/2024

LIQUOR RUNNERS

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ACCIDENT- INCIDENT INVESTIGATION FORM

HSE-INC-04

Other	Other
