DGB (Proprietary) Limited
(Reg. No. 1946/021311/07)
www.dgb.co.za

DGB (PTY) LTD MIDRAND [1]
P/BAG X212, MIDRAND, 1685
724 16TH ROAD, MIDRAND, 1685
PHONE: 011 653-1000
FAX: 011 507-5383
DGB - NLA REGISTRATION CERTIFICATE Ref 16783

DELIVER TO
CHECKERS L/S KING WILLIAMSTOWN
SHOP
CROSS STREET
METLIFE MALL KING WILLIAMSTOWN
EAST LONDON 0000 SOUTH AFRICA
CURRENCY ZAR

INVOICE TO
SHOPRITE CHECKERS (PTY) LTD
PO BOX 215
BRACKENFELL
7561
SOUTH AFRICA
VAT NO. / NLA-ECP00131/03026/OF

COPY TAX INVOICE

VAT REG. No. 4490105063

Order Date	Our Ref. No.	Your Ref. No.	Account No.	Terms	Territory	Invoice Date	Invoice Number
07.05.2024	102285829 [illegible]	1153698395	17694	166	EAS000	10.05.2024	702395929
						Delivery Date	11.05.2024

PAGE 1 of 1

Product Code	Description	Units Per Case	Cases	✔	Units	✔	Price	Discount	Net Price	Total Value Excl. VAT	VAT	Total Value Incl. VAT
DGB (Pty) Ltd												
100677	KANONKOP KADETTE CAPE BLEND 750ML	6x750ml	1		0		596.14	0.00	596.14	596.14	89.42	685.56

CHECKERS METLIFE MALL (38099)
GP 009243 DATE 11/6/24
SH RETURNS
CLAIM No: CLAIM No:
No. OF CARTONS:
CONTENTS NOT CHECKED
RECEIVED BY:
FULL SIGNATURE:
EMPLOYEE No: 1089242
SIGNATURE INVALID UNLESS GR[illegible]

Litres Spirits	Litres Fort Wine	Litres Unf. Wine	Litres Whiskey	Litres Other	Total Litres	Total Cases	Total Units	Total Weight (Kg)	Total Volume (m³)	Total Value Excl. VAT	Total VAT	Total Value Incl. VAT
0.00	0.00	4.50	0.00	0.00	4.50	1.000	0.000	8.600	0.014	596.14	89.42	685.56

Goods Received by Customer – Print Name	Goods Received by Customer – Signature	Date

If paid **COD**, a 2% discount is deductable from the total Invoice amount.
PLEASE USE YOUR ACCOUNT NUMBER 17694 AS A REFERENCE
WHEN PAYING VIA EFT
Customers with terms only: If paid 15 days from statement, a 1.5% discount is deductible

Alt Tel: ORDERS (0860 342-100) E-mail Accounts: dgodebtors@dgb.co.za
The calling bay is open: Mon - Thurs: 08h00 to 16h15 and Friday: (08h00 to 14h45)
Plant: 2290 Rep Code: 41370

PRO FORMA - RETURNS NOTE

EMPTY RETURNS				OTHER RETURNS							
CODE	DESCRIPTION ITEM	QTY	VALUE	CODE	ORIG. INV. NO.	DESCRIPTION	PACK	CASES	UNITS	VALUE	REMARKS

EMPTIES / RETURNS RECEIVED:

DRIVER'S SIGNATURE: _____ CUSTOMER'S SIGNATURE: _____