

# BECK FAMILY ESTATES



## Tax Invoice

**Ship -to Address:**  
**Tops @ Malelane (63004)**  
 1240 Air Street  
 Malelane  
 1320

**Bill-to Customer No:**  
 Account Number TOPS0094  
 VAT Registration No 4110168723  
 External Order 74995  
 Invoice Number INV10889  
 Order No. SO11215  
 Invoice Date 26/03/2025  
 Rep Name Toine Shoeman  
 Delivery Date TUE

**Postal Address**  
 PO Box 39  
 Malelane  
 1320

### Beck Family Estates (Pty) Ltd

**VAT No** 4030252946  
**Reg No** 2000/024662/07  
**Liq Lic No** WCP/017838 | WP/011955

Code	Item Description	Warehouse Name	QTY	Unit of Measure	Price (Ex)	Price (In)	Disc %	Nett Total (Ex)	Tax	Nett Total (In)
100635/300630	GB Brut NV 750ml	Liquor Runners JHB	1.00	Case - 06 x 750ml	1 020.00	1 173.00	10.0 %	918.00	137.70	1 055.70
104688/312374	GB Bliss Nectar Rose NV	Liquor Runners JHB	2.00	Case - 06 x 750ml	1 020.00	1 173.00	0.0 %	2 040.00	306.00	2 346.00

Tops at Malelane  
 Tel 013 790 0157  
 Fax 013 790 0179

*Nicholas  
 RJB  
 F 702 1622*

#### Banking Details

Account Name Beck Family Estates (Pty) Ltd  
 Bank Name FNB  
 Bank Account 62699638626  
 Branch Code 210554  
 SWIFT Code FIRZAJJ  
 Payment Ref TOPS0094 INV10889

**Received By** *[Signature]*  
**Date** 01/04/25  
**Signed** *[Signature]*

Total (Excl)	2 958.00
Tax 15.00 %	443.70
<b>Total (Incl)</b>	<b>3 401.70</b>
Discount	0.00
<b>Total (Incl)</b>	<b>3 401.70</b>

**Beck Family Estates (Pty) Ltd**  
 Telephone: 021 870 1130 Email: bfe@liquorgistics.co.za  
 Physical Address: Observatory Business Park, 2 Fir Street, Observatory, Cape Town, 7925  
 Postal Address: PO Box 7198, Noorder Paarl, Western Cape, 7646

NATIONAL PARK LIQUOR STORES (PTY) LTD  
t/a TOPS MALALANE  
PO BOX 280 MALALANE 1320, TEL: (013) 790 0157  
EMAIL: tops@edlex.co.za

41746

## GOODS RECEIPT

Received from Supplier:.....  
Beck Family.....  
Supplier Invoice No.:..... 10889.....  
Courier Details:..... OWN.....  
Date:..... 01/04/2025.....  
Goods Received By (Print Name):..... PRODU.....  
Signature:..... [Signature].....  
Document Amount (in Rands):..... R 3 401,00.....

Claim --AV Number:..... Claim Amount:.....

CONTENTS NOT CHECKED

IF PAID	
CHEQUE No.:	
AMOUNT	
DATE	

MINUTEMAN PRESS (445540) Tel: 013 752 2523