



Tax Invoice

Charge To:
SPAR LOWVELD
P O BOX 33
vondor 601266 PORTEL
1200 NELSPRUIT
CYNTHIA FRANCIS

Gauteng LR
Posbus 544
UPINGTON, 8800
South Africa

Registration No. 2023/694851/07
Liquor Licence No. RG0000760
VAT Registration No. 4550115309
NCR No. NCRCP20019

Ship-to Address
529-237034

TOPS AT WESTEND 80666
WESTEND SHOPPING CENTRE, SHOP 6
C/O MADIBA DRIVE & ENOS MABUZA DRIVE
1200 NELSPRUIT

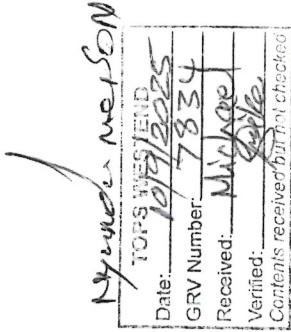
Email debtors@owk.co.za
Salesperson Lowveld
External Document No. 2114072 / 49595
Customer VAT Reg. No. 4730306893
Invoice No. RIA12367835
Document Date 05 September 2025
Due Date 31 October 2025
Customer Liquor Licence No. 9-2-1-05459 NOV 22

No.	Description	Quantity	Unit of Measure	Unit Price		Disc. %	VAT %		Line Amount	
				Excl. VAT			Excl. VAT			
31033	ORC RED JEREPIGO 750ML	1	6 X 750ml	529.6248		-8%			15	487.25
31040	ORC CAPE RUBY 750ML	1	6 X 750ml	529.6248		-8%			15	487.25
89015	ISLAND VIEW SWEET RED 1L	1	12X1L	353.4888					15	353.49
89021	ISLAND VIEW DRY RED 1L	1	12X1L	353.4888					15	353.49
Total Litres		514.50		Subtotal						1,681.48
				VAT Amount						252.22
				Total R Incl. VAT						1,933.70

Banking Details:

Bank	First National Bank (FNB)
Account No.	622 889 320 83
Bank Branch No.	230604
Your Reference	529-237034

Receiver Name:	Date Received:	Signature:
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No expired stock will be credited on accounts.

IMPORTANT NOTICE: Our banking details have not changed. We will not be liable for any loss that may be suffered resulting from any payment by you to an incorrect bank account (or bank account purporting to be Orange River Cellars). Please also pay special attention to any e-mails you may receive purporting to emanate from our offices, which may resemble our e-mail domain, regarding any change in banking details.



WESTEND

GOODS RECEIPT

GRV **Nº** **07834**

Received from Supplier: _____

Orange River

Supplier Invoice No: _____

RTA12367835

Courier Details: _____

Date: _____

10/9/2025

Goods Received By (Print Name): _____

Michael

Signature: _____

Mike

Document Amount:
(in Rands): _____

193370.

Claim - A/V Number: _____ Claim Amount: _____