



Tax Invoice

Charge To:

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

Nelspruit 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. 1973383 / 46031

Customer VAT Reg. No: 4730306893

Invoice No. RI12982486

Document Date

28 October 2024

Due Date

30 November 2024

Customer Liquor Licence No. 9-2-1-05459 NOV 22

No.	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Disc. %	VAT %	Line Amount Excl. VAT
89016	ISLAND VIEW NATURAL SWEET ROSE 1L	1	12X1L	314.52		15	314.52
89015	ISLAND VIEW SWEET RED 1L	1	12X1L	333.48		15	333.48
89021	ISLAND VIEW DRY RED 1L	1	12X1L	333.48		15	333.48
31061	OLD BROWN TETRA 1L	1	12X1L	545.16	-7%	15	507.00
	Rounding (10c)	1		-0.05		0	-0.05

Total Litres

164.00

Subtotal

1,488.43

VAT Amount

223.27

Total R Incl. VAT

1,711.70

Nicholas
FRANL451L

Banking Details:

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

TOPS WESTEND
Date: 30/10/24
GRV Number: 5176
Received: [Signature]
Verified: [Signature]
Contents received but not checked

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.

tops!

WESTEND

GOODS RECEIPT

GRV No: 5176

Received from Supplier: ORANGE RIVER

Supplier Invoice No: R112932426

Courier Details:

Date: 30/10/20

Goods Received by (Print Name) SPARKS

Signature

Document Amount:

(In Rands) 1711-20

Claim - A/ V Number Claim Amount: