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

DGB (PTY) LTD MIDRAND [1]
P/BAG X212, MIDRAND, 1685
724 15TH ROAD, MIDRAND, 1685
PHONE: 011 653-1000
FAX: 011 507-5383
DGB - NLA REGISTRATION CERTIFICATE Ref 16783

DELIVER TO
OVERLAND DRIVE THRU LIQUOR
OLD WASH BAY MASHISHING
1 CORNER DE CLERQ AND BUHRMANN STREETS THABA CHWEU
EHLANZENI 0000 SOUTH AFRICA

INVOICE TO
OVERLAND DRIVE THRU LIQUOR
OLD WASH BAY MASHISHING
1 CORNER DE CLERQ AND BUHRMANN STRE
EHLANZENI, 0000
SOUTH AFRICA
VAT NO. 4570216517/ NLA-9-2-1-05306

COPY TAX INVOICE

VAT REG. No. 4490105063

Order Date	Our Ref. No.	Your Ref. No.	Account No.	Terms	Territory	Invoice Date	Invoice Number
01.07.2024	102295127 8012440123	CINDY	60535	15S	NEL000	03.07.2024	702405753
						Delivery Date: 04.07.2024	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
105611	COCO RICO SALTED CARAMEL & COCONUT	6x750ml	1		0		650.82	52.07-	598.75	598.75	89.81	688.56
105495	JAGERMEISTER 200ML	4x12x200ml	1		0		4,563.13	114.08-	4,449.05	4,449.05	667.36	5,116.41

POD

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
14.10	0.00	0.00	0.00	0.00	14.10	2.000	0.000	32.200	0.036	5,047.80	757.17	5,804.97

If paid **COD**, a 2% discount is deductable from the total invoice amount.
PLEASE USE YOUR ACCOUNT NUMBER 60535 AS A REFERENCE WHEN PAYING VIA EFT
Customers with terms only: If paid 15 days from statement, a 1.5% discount is deductible

Goods Received by Customer – Print Name	Goods Received by Customer – Signature	Date
Charmain		4/7/24

Alt Tel: ORDERS (0860 342-100) E-mail Accounts: dgbdebtors@dgb.co.za
The calling bay is open: Mon - Thurs: 08h00 to 16h15 and Friday: (08h00 to 14h45)
Plant: 2240 Rep Code: 41385

Video1

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: _____