



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: 011 507-5363
DGB - NLA REGISTRATION CERTIFICATE Ref 16793

DELIVER TO

Tops @ Riverside#53016
WHITE RIVER MALL
RIVERSIDE PARK X10
NELSPRUIT 1200 SOUTH AFRICA

CURRENCY ZAR

INVOICE TO	SPAR LOWVELD DROPSHIPMENT
	PO BOX 33
	NELSPRUIT
	0000
	SOUTH AFRICA
	VAT NO. 4240252702/ NLA-9-2-1-10341

INVOICE TO

Order Date	Our Ref. No.	Your Ref. No.	Account No.	Terms	Territory	COPY TAX INVOICE	Invoice Date	Invoice Number
30.09.2024	102534287	80020	10397	ZZ20	NEL000		01.10.2024	702446266
	8012482290							
						VAT REG. No. 4490105063	02.10.2024	PAGE 1 of 1
						Delivery Date		

Product Code		Description				Units Per Case	Cases	✓	Units	✓	Price	Discount	Net Price	Total Value Excl. VAT	VAT	Total Value Incl. VAT
DGB (Pty) Ltd 100699		VERGELEGEN RES CABS AU V 750ML				6x750ml	1		0		1,591.30	0.00	1,591.30	1,591.30	238.70	1,830.00
POD RIVERSIDE TOPS Date: 02/10/24 GRV Number: 49726 Received: [Signature] Verified: Contents received but not checked																
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				9.000	0.013		1,591.30	238.70	1,830.00

IF PAID COD, A 2% DISCOUNT IS DEDUCTABLE FROM THE TOTAL INVOICE AMOUNT.
PLEASE USE YOUR ACCOUNT NUMBER 10397 AS A REFERENCE
WHEN PAYING VIA EFT

Customers with terms only: If paid 15 days from statement, a 1.5% discount is deductible

REPRINT

Goods Received by Customer – Print Name

Goods Received by Customer – Signature

Date _____

Alt Tel: ORDERS (0860 342-100) E-mail Accounts: dgbdebitors@dgb.co.za
The calling bay is open: Mon - Thurs: 08h00 to 16h15 and Friday: (08h00 to 14h45)
Plant: 2240 Rep Code: 41322

PRO FORMA - RETURNS NOTE

[illegible]

EMPTIES / RETURNS RECEIVED:

DRIVER'S SIGNATURE: _____

CUSTOMER'S SIGNATURE: _____