



**DGB (PTY) LTD**  
 724 16TH ROAD, MIDRAND, 1685  
 Reg No. 1946/021311/07  
 VAT REG. No. 4490105063  
 NLA REG No. 16783

Call Centre: 0860 342 100  
 Reception: 011 653 1000  
 Accounts: dgbdebtors@dgb.co.za  
 Website: www.dgb.co.za

**Tax Invoice : 702546056**

**Deliver To:**  
 TOPS@WESTEND #80666  
 WESTEND SHOPPING CENTRE  
 CNR DR ENOS MABUZA & MABIDA DRV  
 NELSPRUIT 1200  
 SOUTH AFRICA

**Invoice To:**  
 SPAR LOWVELD DROPSHIPMENT  
 PO BOX 33  
 NELSPRUIT  
 0000  
 SOUTH AFRICA

Account No: **60175**  
 Currency: ZAR  
 Customer Ref: 47796  
 Customer VAT No: 4730306893  
 Cust. Liquor License: 9-2-1-09002  
 Terms: ZZ20  
 Settlement Discount: 15 Days from statement 1.5%

Inv Date: 07.04.2025  
 Order No: 102427000  
 Order Date: 31.03.2025  
 Delivery No: 8012580762  
 Delivery Date: 09.04.2025  
 Route:  
 Plant: 2210

Product Code	Description	Pack Size	QTY	UoM	Unit Price	Discount	Net Price	Total Value Excl. VAT	VAT	Total Value Incl. VAT
<b>DGB (Pty) Ltd</b>										
101675	STRAWBERRY LIPS 750ML	6x750ml	5	CS	782.84	0.00	782.84	3,914.20	587.13	4,501.33
101675	STRAWBERRY LIPS 750ML	6x750ml	1	CS	FREE STOCK	0.00	0.00	0.00	0.00	0.00

<b>TOPS WESTEND</b>	
Date:	9/4/25
GRV Number:	8462
Received:	<i>[Signature]</i>
Verified:	<i>[Signature]</i>
Contents received but not checked	

6	0	27.00	50.400	3,914.20	587.13	4,501.33
Total Cases:	Total Units:	Total Litres	Total Weight (kg):	Total Excl.VAT	Total VAT	Total Incl.VAT

**Special Instructions:**

Approved as per BIG HIT DEALS

*[Signature]*

**Returns Reasons:**

- Duplicate Order
- Overstocked
- Captured Incorrectly
- Damaged Product
- Not Ordered
- Late Delivery
- Not Scanning
- No Stock
- Invalid PO

**Goods Received by Customer**

Print Name:  
 Signature:  
 Date:

**Returns Received by Driver**

List all short deliveries or rejected stock on both invoice copies  
 Print Name:  
 Signature:  
 Date:



**WESTEND**

**GOODS RECEIPT**

GRV No: **6462**

Received from Supplier: *DGB*

Supplier Invoice No: *702546056*

Courier Details: .....

Date: *9/14/25*

Goods Received by (Print Name) *Jarvis*

Signature *[Signature]*

Document Amount:  
(In Rands) *4501-33*

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

Joe Slater printers 064 845 8945