

VAT NO: 4450191681  
LICENCE NO: NLA/RG0000384  
REG NO: CK2000/064578/23  
TEL : 0219057713  
FAX : 086 509 9587

SANDS TRADERS CC T/A  
WINWAYS MARKETING & DISTRIBUTION  
P O BOX 180  
BLACKHEATH  
7581

Tax Invoice

Date

29/04/2024

Page

1

Document No

IN907514

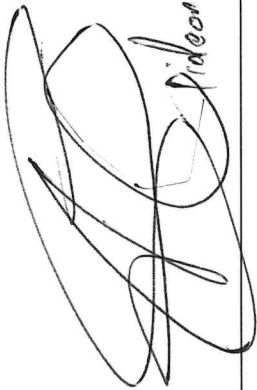
63004 TOPS MALELANE NEL  
THE SPAR GROUP  
PO BOX 280  
MALALANE  
1320

Deliver to

INKWAZI CENTRE  
1 AIR STREET  
MALELANI  
1320

| Account | Your Reference | Tax Exempt | Tax Reference | Sales Code |
|---------|----------------|------------|---------------|------------|
| SLV034  | 69869          | N          | 4110168723    | NELSP      |
|         |                |            |               | Exclusive  |

| Code   | Store   | Description                   | Quantity | Unit | Unit Price | Disc% | Tax    | Nett Price |
|--------|---------|-------------------------------|----------|------|------------|-------|--------|------------|
| BLA002 | KD<br>N | Black Box Merlot (4)          | 1        | CASE | 765.22     | 5.00  | 109.04 | 726.96     |
| BLA001 | KD<br>N | Black Box Merlot/Cabernet (4) | 1        | CASE | 765.22     | 5.00  | 109.04 | 726.96     |



Tops at Malelane  
Tel:013 790 0157  
Fax:013 790 0179

ABSA 4094710495/Branch 632005  
Goods remain the property of  
Wineways until paid in full.  
Received in good order  
Signed \_\_\_\_\_ Date \_\_\_\_\_

|                  |          |
|------------------|----------|
| Sub Total        | 1 453.92 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 1 453.92 |
| Tax              | 218.08   |
| Total            | 1 672.00 |

NATIONAL PARK LIQUOR STORES (PTY) LTD  
t/a TOPS MALALANE  
PO BOX 280 MALALANE 1320, TEL: (013) 790 0157 FAX: (013) 790 0179

**GOODS RECEIPT** **38144**

Received from Supplier:.....

*SANDS TRADERS*

Supplier Invoice No.: *907512*

Courier Details: *OWN*

Date: *30/04/2018*

Goods Received By (Print Name) *SANDS*

Signature: *[Signature]*

Document Amount (in Rands) *R 1 672.00*

Claim --AV Number:..... Claim Amount:.....

CONTENTS NOT CHECKED

| IF PAID     |  |
|-------------|--|
| CHEQUE No.: |  |
| AMOUNT      |  |
| DATE        |  |