



# Tax Invoice

KIRK  
125 Smuts Street, Rocky's Drift  
Nelspruit

CUSTOMER

SPAR L: TOPS @ MALELANE W  
NATIONAL PARK LIQ STORES PTY LT  
MEMBER 63004 / VENDOR 601244  
PO BOX 33  
NELSPRUIT  
1200  
VAT No: 4110168723      Lic. No: MPU/9-2-1-01823

PO Box 11504  
Hatfield  
0028  
Tel: +27 137582422  
Fax: +27 866316773  
Email: officeadmin@namaquawines.co.za  
VAT VENDOR No 4020139574  
Lic. No: 15787

DOCUMENT INFO

Tax Invoice  
I1993009

DELIVERY TO:

AIR STR  
INKWAZI SHOPPING CENTRE  
CLEARANCE CODE

Terms: Supermarket Group GOOD  
2024/05/14

| Sales Rep: TILANI - TILANI VISSER |                                | AM001            | Page                   | 1      |
|-----------------------------------|--------------------------------|------------------|------------------------|--------|
| DATE & TIME                       | DOCUMENT NO                    | ACCOUNT NO.      | ORDER NO.              |        |
| 2024/05/14                        | PIC2405070000202               | SPARL014         | ORD-210654/1           |        |
| CODE                              | DESCRIPTION                    | QTY              | PRICE                  | DISC1  |
| PEACHM                            | CHILLERS PUNCH PEACH & M 440ML | 24               | 16.00                  | 0.00   |
| TOTALS                            |                                | 10,01            | 24,00                  |        |
| 15.00%                            |                                | TOTAL VAT: 57,60 | TOTAL (Ex VAT): 384,00 | ZAR    |
|                                   |                                | TOTAL            |                        | 441.60 |
|                                   |                                | AMOUNT DUE       |                        | 441.60 |

Please use your account number as reference on your Deposit / EFT payment.  
All goods remain the property of NAMAQUA WINES until paid in full  
Account Name: Namaqua Wines SA (Pty) Ltd  
Bank: Investec Bank Limited  
Account Number: 40005060042  
Account Type: Current Account  
Branch Number: 580105

Name: Zarnier      Date: 16/02/24  
Signature: \_\_\_\_\_

Tops at Malelane

Tel: 013 790 0157  
Fax: 013 790 0179

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 38301

Received from Supplier:.....

*N. M. M. M. M. M.*

Supplier Invoice No.: *1993009*

Courier Details: *Curia*

Date: *16/05/24*

Goods Received By (Print Name) *Zakane*

Signature: *[Signature]*

Document Amount (in Rands) *R 44.60*

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

CONTENTS NOT CHECKED

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