



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@namaquawinessa.co.za
VAT VENDOR No 4020139574
Lic. No: 15787

DOCUMENT INFO
Tax Invoice 12042754

DELIVERY TO:

AIR STR
INKWAZI SHOPPING CENTRE
CLEARANCE CODE

Terms: Supermarket Group GOOD
2024/11/18

Sales Rep: TILANI - TILANI VISSER			DB001	Page	1			
DATE & TIME		DOCUMENT NO	ACCOUNT NO.		ORDER NO.			
2024/11/18		PIC2411070000170	SPARL014		73018			
CODE	DESCRIPTION	QTY	PRICE	DISC1	NET PRICE	TOTAL EX VAT	VAT	TOTAL
FCRO3L	4COUSINS SWEET ROSE 3L	4	104.35	0.00	104.35	417.40	62.61	480.01
536	4COUSINS NAT. SWEET RED 750ML	12	45.20	5.00	42.94	515.32	77.30	592.62
534	4COUSINS NAT. SWEET ROSE 750ML	12	45.20	5.00	42.94	515.32	77.30	592.62
CRISB	CHRISTINA SAUV/BLANC 750ML	6	138.97	0.00	138.97	833.82	125.07	958.89
LXSFRL	VL LOXTONIA S FRUIT APPL 340ML	24	20.84	0.00	20.84	500.23	75.03	575.26
TOTALS		65.14	58.00			AMOUNT DUE		
15.00%		TOTAL VAT: 417.31		TOTAL (Ex VAT): 2 782.09		ZAR 3 199.40		

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: *N. van der Merwe* Date: *19/11/24*

Signature: *[Signature]*

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

FRYN 451

NATIONAL PARK LIQUOR STORES (PTY) LTD
t/a TOPS MALALANE
PO BOX 280 MALALANE 1320, TEL: (013) 790 0157
EMAIL: tops@edlex.co.za

GOODS RECEIPT **40289**

Received from Supplier: Namobius Wines

Supplier Invoice No.: 2042754

Courier Details: Deur

Date: 19 July 2020

Goods Received By (Print Name): Namobius

Signature: [Signature]

Document Amount (in Rands): R 3 199.40

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

CONTENTS NOT CHECKED

IF PAID		
CHEQUE No.:		
AMOUNT		
DATE		