

TAX INVOICE COPY



Customer Tops Malelane 63004 DS
VAT No. 4320156120
Liquor License No. 9-2-1-01823
Bill to Cust No. SPA004
Sell to Cust No. SPA4 63004
Delivery Address: Tops Malelane 63004 DS
The Spar Group Ltd
Malelane
Inkwazi Centre
Air Street
Malelane, 1320
Contact Name Lex Hollman
Contact No. +27 13 793 8336

Page 1 of 1
Meridian Wine Distribution (Pty) Ltd
17 Spartan Crescent
Eastgate Extension
Marlboro, 2090

Phone No. (011) 531 4700
VAT Reg No. 4520181753
Liquor License No. RG0005535
Company Reg No. 1999/001626/07

Your Reference - 73117

Invoice No.	PSII 150250	Posting Date	25/11/2024	Payment Terms	15 Days from Statement
SO No.	SO1262759	Due Date	15/12/2024	Promised Delivery Date	26/11/2024

Code	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Discount %	Total Excl. VAT
CRAFT LIQUOR MERCHANTS						
ESMCOGRE	ESM Grenadine Cordial	1	12 x 750ml	487.32		487.32
ESMMAL	Malva Pudding	5	1 x 750ml	99.82	18.58	406.35
INCMACBRDG	Brooks Hard Seltzer Dragon Granadilla	5	24 x 300ml	360.00		1,800.00
INCMACBRSK	Brooks Hard Seltzer Strawberry Kiwi	6	24 x 300ml	360.00		2,160.00
INCMACBRWA	Brooks Hard Seltzer Watermelon	3	24 x 300ml	360.00		1,080.00

Craft Liquor Merchants Total **5,933.67**

Total ZAR Excl. VAT **5,933.67**

15% VAT 890.05

Total ZAR Incl. VAT **6,823.72**

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

Thanks for your business.

BANKING DETAILS

Acc Name: Meridian Wine Distribution (Pty) Ltd
Bank Name: First National Bank

Branch: 250 655
Acc No: 62 204 833 744

Swift: FIRNZAJJ



Call Us
0861 113 959



Email Us
orders@groupmeridian.co.za



Customer Service
query@groupmeridian.co.za

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

40370

Received from Supplier: *Meridiam Wine*

Distribution

Supplier Invoice No.: *PS1 11 150250*

Courier Details: *Own*

Date: *26/11/2024*

Goods Received
By (Print Name): *Auston*

Signature: *[Signature]*

Document Amount
(in Rands): *R 6,823,72*

Claim --AV Number: Claim Amount:

CONTENTS NOT CHECKED

IF PAID	
CHEQUE No.:	
AMOUNT	
DATE	