



Tax Invoice

Charge To:

SPAR LOWVELD
P O BOX 33
vendor 601266 PORTEL
1200 NELSPRUIT
CYNTHIA FRANCIS

Nelspruit LR
Posbus 544
UPINGTON, 8800
South Africa

Registration No. 2023/694851/07
Liquor Licence No. RG0000760
VAT Registration No. 4550115309

Ship-to Address

529-237035

TOPS AT COURTSIDE 80769 DC MANAGED
CNR N4 & KAAPSEHOOP ST
1200 NELSPRUIT

Email debtors@owk.co.za
Salesperson Lowveld
External Document No. 1846118/ 35450
Customer VAT Reg. No. 4240275307
Invoice No. R112981585
Document Date 30 January 2024
Due Date 29 February 2024
Customer Liquor Licence No. 9-2-1-03069 APR 24

No.	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Disc. %	VAT %	Line Amount Excl. VAT
21120	NATURAL SWEET RED TETRA 1L	1	12X1L	431.52	-11%	15	384.05
89016	ISLAND VIEW NATURAL SWEET ROSE 1L	1	12X1L	299.52		15	299.52
89015	ISLAND VIEW SWEET RED 1L	2	12X1L	317.64	-5%	15	603.52
89012	ISLAND VIEW SWEET ROSE 3L	1	6 X 3L	515.64	-5%	15	489.86
	Rounding (10c)	1		-0.09		0	-0.09
Total Litres		66.00		Subtotal			1,776.86
				VAT Amount			266.54
				Total R Incl. VAT			2,043.40

Banking Details:

Bank	First National Bank (FNB)
Account No.	622 889 320 83
Bank Branch No.	230604
Your Reference	529-237035

Receiver Name:

Date Received:

Signature:

TOPS AT COURTSIDE
STORE CODE: 80769
GOODS RECEIVED
GRV NUMBER: 7362
RECEIVED BY: [Signature]
DATE: 31/01/24
CLAIM NUMBER:
VERIFIED:

MY JACOBS (PTY) LTD t/a
Reg No: 2016/377030/07

tops! COURTSIDE

GOODS RECEIPT

7362

Received from Supplier: _____

Omega mer

Supplier Invoice No.: _____

R112981585

Courier Details: _____

Date: _____

31/01/2024

Goods Received By (Print Name) _____

R11

Signature: _____

[Signature]

Document Amount
(in Rands) _____

24943.40

Claim --AV Number: _____

Claim Amount: _____

CONTENTS NOT CHECKED

IF PAID	
CHEQUE No.:	
AMOUNT	
DATE	

Printed by: 180320 Tel: 013-7415307