

TAX INVOICE

IN-TS-000104629

T14

Invoice Date 18/02/2025 Page 1
 Delivery Date 20/02/2025

Bidfood (Pty) Ltd - Limpopo Delivery address PB Liquor Merchants (Pty) Ltd
 Bidvest Foodservice -Polokwane Bidvest Foodservice Polokwane Bottelary Road
 Box 3160 61 Silicon Street
 Limpopo Ext. 17 Ladine Polokwane
 VAT: 4560266209 VAT: 4560266209 Stellenbosch
 South Africa 7605

Tax Reference 4560266209

Account: CCS001 Your Reference PO00094201 Pick ticket #

Loc	Code	Description	mL	Unit	Quantity	Unit Price	Disc %	Tax	Exclusive Nett Price
LPO	BPRB	Babylon's Peak Shiraz-Carignan	750	6	2 ✓	521.72	0.00	156.52	1 043.44
LPO	SHCS	Stellenbosch Hills Cab Sauvignon	750	6	1 ✓	414.65	0.00	62.20	414.65
LPO	SLME	Slanghoek Private Col Merlot	750	6	3 ✓	333.90	0.00	150.26	1 001.70
LPO	SLSH	Slanghoek Private Col Shiraz	750	6	1 ✓	334.02	0.00	50.10	334.02
LPO	SLVRB	Slanghoek Vin Rouge (Smooth Blended Red)	750	6	1 ✓	238.70	0.00	35.80	238.70
LPO	BORCSWB	Boland Reserve Cabernet Sauvignon - Wild Boar	750	6	1 ✓	609.29	0.00	91.39	609.29
LPO	KHDRP	Koelenbosch Director's Reserve Pinotage	750	6	2 ✓	1 151.57	0.00	345.47	2 303.14
LPO	SLCB	Slanghoek Private Col Chenin Blanc	750	6	1 ✓	297.17	0.00	44.58	297.17
LPO	SLSB	Slanghoek Private Col Sauvignon Blanc	750	6	2 ✓	297.17	0.00	89.15	594.34
LPO	PBLASW	Perdeberg Lighthearted Low Alcohol Sparkling White	750	6	1 ✓	426.40	0.00	63.96	426.40
LPO	KHSB	Koelenbosch Sauvignon Blanc	750	6	3 ✓	315.59	0.00	142.02	946.77
DEFA		OUT OF STOCK - Bonnievale Limited Release Chardonnay		EA					

Total Quantity: 18.01 Subtotal Excl R 8,209.62
 Discount: R 0.00
 VAT: R 1,231.45
 Total Incl: R 9,441.07

PAYMENT DETAILS:

Name of Beneficiary: PB Liquor Merchants (Pty) Ltd
 Name of Bank: Standard Bank
 Address of Bank: Paarl Mall, Cecilie St Paarl, South Africa, 7620
 Account Number: 023 163 690
 Routing Number (SWIFT Code): SBAZAZ33

RECEIVED BY BIDFOOD - DRY/FROZEN

CONTENTS CHECKED (Expired / Production date)
 Date: 20/02/25 Time: 16:00 Temperature: _____

No of articles _____ GRV No: _____
 Pallets/Crates In Out Vehicle Reg No: _____
 Chemicals / Residues / Spillages / Broken Packaging _____
 Pest Infestation, Compartment / Broken Packaging / Pallets _____
 Cross Contamination / Broken Packaging / Spillages _____
 Broken Packaging: Rust / Dented / Mould / Blown Packaging _____
 Physical damage / Nails / Wooder Splinters from pallet _____

Name: *[Signature]* Signature: *[Signature]*

Signature & Date

Receiving Party