



Building 6, Country Club Estate, 21 Woodlands Drive
Woodmead, Sandton, GAUTENG, 2191
Phone: 011 802 0600 Fax: 011 802 0620

Reg No: 1994/004226/07
Vat No: 4670144973



Tax Invoice

Buyer: MLRE (Pty) Ltd
Tops Groblersdal Mall 31047
Sh 18 Groblersdal Mall
cnr Van Riebeeck & Nywerheid Streets
Groblersdal 0470

Consignee:
Tops Groblersdal Mall 31047
Sh 18 Groblersdal Mall
cnr Van Riebeeck & Nywerheid Streets
Groblersdal 0470

Doc No: 1521878
Date: 2024-11-12
Customer: 59955
Branch / Plant: SDPB
Warehouse LL: NTV/037560
Order No: 1391758 SO
Liquor License: NTV/035651

Buyer's VAT: 4740276029

Requested Date: 2024-11-11

Customer PO: Lesiba

Currency: ZAR

Payment Term: 15 Days from statement 1.0%

Item number	Description	UoM	Qty	Unit Selling Price	Discount	VAT	Total Amount
141930	Malfy Con Arancia 6x750ml 43% 4.2500	EA	3.00	349.62	-4.25	155.42	1,036.11
160550	The Glenlivet 15YO French Oak 6x750ml 43% 23.3333	EA	6.00	934.38	-23.33	819.94	5,466.28
101456	Jameson Triple Triple 12X750ml 43% 12.5833	CA	1.00	382.10	-12.58	665.13	4,434.19
162100	Absolut Berry Vodkarita 6x(4x300ml) 6% 56.5040	CA	3.00	584.54	-56.50	237.62	1,584.11
162101	Absolut Passionfruit Martini 6x(4x300ml) 6% 56.5040	CA	3.00	584.54	-56.50	237.62	1,584.11
162105	Absolut Cranberry Cosmo 6x(4x300ml) 6% 56.5040	CA	3.00	584.54	-56.50	237.62	1,584.11
101475	Jameson Whiskey Standard 12x375ml 43% 5.6667	CA	1.00	159.67	-5.67	277.21	1,848.04
						Total VAT	Total Including

Banking Details

Bank: Citibank ZAR
Account No: *****6023
Branch: SOUTH AFRICA



Name: _____
Signature: _____
Date: _____

Received in good order on behalf of customer



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Item number	Description	UoM	Qty	Unit Selling Price	Discount	VAT	Total Amount
	GROBLERSDAL MALL tops!					2,630.56	20,167.49
						COD Total	19,965.81

RECEIVING

Date: 13/11/24 Time:

Received by: Nelson

Signature: [Signature] GRV no:

CONTENTS NOT CHECKED

Store Code: 31047

Banking Details

Bank: Citibank ZAR
Account No: *****6023
Branch: SOUTH AFRICA



Received in good order on behalf of customer

Name: _____
Signature: _____
Date: _____