

BLUE SKY BRAND COMPANY (PTY) LTD

27 Bright Street Somerset West 7130

VAT Reg No: 4810259673 , Co Reg No:2011/008513/07 , Liquor Reg: RG0003999

Company Contact Details

Tel No: 021 201 1049
Email: Orders@blueskybrands.co.za

Tax Invoice

Date: 03/04/2025
Document No: INV00280592

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Customer Details:

Boxer Superstores (Pty) Ltd
343- Boxer Liiquors Zebediele Plaza
88/02548/07
PO Box 370
GLN 6001007091439

30 Days

Deliver To: 343- Boxer Liiquors Zebediele Plaza
CNR R519 & Elandskraal Moletlane
Moletlane

0679

Account

BOX116

Your PO Number

350827

Tax Reference

4520103302

Sales Code

HOCT

Item Code	Store	Item Description	Quantity	Price (Ex)	Disc %	Total (Excl)	Tax	Total (Incl)
25001	AMM	Honor VS Cognac 750ml	6.00	443.44		2,660.64	399.10	3,059.74
37101	AMM	Royal Flush Gin	12.00	221.70		2,660.40	399.06	3,059.46
37102	AMM	Royal Flush Luxe Amber Gin	12.00	221.70		2,660.40	399.06	3,059.46

BOXER SUPERSTORES (PT) LTD
CONTENTS NOT CHECKED

Branch: Zebediele Plaza
Branch No: 343
GRV No: 16807909
Date Received: 03/04/25
Invoice No: 00280592
Chain No: _____
Liquor Reg No: DLG 706 C
Delivery Name: FIELLO

PLEASE NOTE THAT SETTLEMENT DISCOUNT IS ALREADY CALCULATED ON INVOICE

Payment is due strictly according to your payment terms with Blue Sky Brand Company (Pty) Ltd.

Please keep this invoice to return any merchandise within 60 days.

Goods must be returned in a saleable condition.

Ownership is not transferred until amount due is paid.

SubTotal	7,981.44
Discount @ 0.00 %	0.00
Total (Excl)	7,981.44
Tax	1,197.22
NET Total ZAR (Incl)	9,178.66

PLEASE USE YOUR ACCOUNT NUMBER AS THE REFERENCE WHEN MAKING PAYMENT

Received in good order

Signed _____ Date _____

Print Name _____

Banking Details

BLUE SKY BRAND COMPANY (PTY) LTD
FNB (First National Bank)
Account Number: 63050361583
Branch Code: 250655

BOXER SUPERSTORES (PTY) LTD

Reg. No. 1988/002548/07

Supplier: Blue sky brand DELIVERY RECEIVED NOTE Date: 03/04/28
Invoice No.: 00280592
Purchase Order No.: 350827  Branch: cedeka
16807940

Number of Items	Shortages/Returns	Claim Number	Invoice Cost
30	_____	—	9178.66

Delivery received by: [Signature]
Name: [Signature] Supplier's Signature: Micco
Signature: [Signature] Vehicle Registration No.: D.C706L