

CREDIT TAX INVOICE



Customer Tops Mountainview 36290
VAT No. 4490211762
Liquor License No. WCP/043736
Bill to Cust No. SPA204
Sell to Cust No. TOPDS201
Delivery Address: Tops Mountainview 36290
High Point Trading 161 CC
Gordons Bay
Lancaster & Somerset Road
GORDON'S BAY, Western Cape 7151
South Africa
Contact Name Martin Dos Santos
Contact No.

Page 1 of 1

Meridian Wine Distribution (Pty) Ltd
Brackengate Business Park
11 London Circle
Brackenfell, 7561
Cape Town
Phone No. (021) 492 2055
VAT Reg No. 4520181753
Liquor License No. RG0005535
Company Reg No. 1999/001626/07

Your Reference - PSII103370 CL568264 CR1418078

Credit Memo No. PSCR103464

Document Date

05/08/2024

SRO No. S-RETORD108330

Code	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Discount %	Total Excl. VAT
INCSLOR	Scottish Leader Original 750ml	1	12 x 750ml	2,483.40	2.44	2,422.92
INCSLSUP	Scottish Leader Supreme 750ml Gift Pack	1	06 x 750ml	1,314.72		1,314.72
	LR-W2/FRT-02: NOT ORDERED					
	PSII103370 CL568264 CR1418078					

Total ZAR Excl. VAT 3,737.64

15% VAT

560.65

Total ZAR Incl. VAT 4,298.29



Call Us

0861 113 959



Email Us

orders@groupmeridian.co.za



Customer Service

query@groupmeridian.co.za

C/o Range rd & Anfield rd
Blackheath
Kuilsrivier
Cape Town

C/o Range rd & Anfield rd
Blackheath
Kuilsrivier
Cape Town



(021) 903 3880

(021) 903 8874

Pieter@lrsc.co.za

Liquor Runners Cape Town

Http://www.lrsa.co.za

REQUEST FOR CREDIT - CR1418078 2024-08-05 10:09:24

LOAD SHEET Reference - LSID 233877, DATE Delivered - 2024-08-02

Reg. No.	Truck Description	Load Capacity	Driver Name	Dispatcher	Checker
HSZ139FS	FJ26-280C (CKD) ZA	14	J. JACOBS		

Reason for Credit: Not Ordered / Duplicated

Customer Name: TOPS AT SPAR MOUNTAIN VIE

Brief Description of Credit:

Principal Customer Code: TOPDS201

Doc. Date: 2024-07-29 Doc. Ref: PSI1103370 GRV: A 568264 Credit Type: Credit Invoice Amt: R 4298.29

Stock Code	Stock Description	Unit	Packsize	Reason Code	Reason	Batch	QTY
INCSLOR	Scottish Leader Original 750ml	CS	12 x 750ML	W2	Not Ordered / Dupl		1
INCSLSUP	Scottish Leader Supreme 750ml Gift Pack	CS	6 X 750ML	W2	Not Ordered / Dupl		1

Total Number of Items to be credited on Decument Ref: PSI1103370 (2 Product Type) 2

Authorized by: _____
[date]

TAX INVOICE COPY



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11 London Circle
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Cape Town

Phone No. (021) 492 2055
VAT Reg No. 4520181753
Liquor License No. RG0005535
Company Reg No. 1999/001626/07

Contact Name Martin Dos Santos
Contact No.

Your Reference - 1946455

Invoice No.	PSII 103370	Posting Date	01/08/2024	Payment Terms	15 Days from Statement
SO No.	SO1207800	Due Date	15/09/2024	Promised Delivery Date	02/08/2024

Coda	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Discount %	Total Excl. VAT
CRAFT LIQUOR MERCHANTS						
INCSLOR	Scottish Leader Original 750ml	12	x 750ml	2,483.40	2.44	2,422.92
INCSLUP	Scottish Leader Supreme 750ml Gift Pack	06	x 750ml	1,314.72		1,314.72
Craft Liquor Merchants Total						3,737.64
Total ZAR Excl. VAT						3,737.64
15% VAT						560.65
Total ZAR Incl. VAT						4,298.29

PRODUCT CODE	CASES	UNITS	REASON
full order			duplicate order
			acc 13301

Send back

TOPS MOUNTAIN VIEW

GOODS RECEIVED

Store code: 36290

GRV #
Claim #
Received by: *M. dos Santos*
Sign:
Date: 21/8/2024

Liquor Runner Cape Town (Pty) Ltd
is a registered National Distributor
REG. NO. RG004327

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

PLEASE QUOTE THE CLAIM NO. ON YOUR CREDIT NOTE

NO: **A 568264**

STORE NAME TOPS Mountain View STORE CODE

3	6	2	9	0
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TOWN _____

STORE TEL (021) 856 0067 DATE 02 / 08 / 24

SUPPLIER INV. DATE: (Use a separate claim per supplier invoice)

QTY	PACK SIZE	CASES	UNITS	CODE/ BARCODE	PRODUCT DESCRIPTION	PRICE (EXCL)	VAT	PRICE (INCL)	REASON
1		1			Scottish Healed Original 750ml X12	2483-40	15%		Double ordered
1					" " Supreme 750ml giftpack	1314-72	15%		Bottle ordered
TOTAL						R			

GOODS HANDLED TO: Joseph (PRINT NAME)
SIGNATURE: [Signature] DATE: 8/27 / 8 / 24
VEHICLE REG. NO: HSZ 139 FS (NBI)
CLAIM PREPARED BY: Samantha
SIGNATURE: [Signature]

RECORD OF CONTACT WITH SUPPLIER: (STORE <u>MUST</u> FOLLOW UP BEFORE SUBMITTING TO D.C.)		
DATE	PERSON SPOKEN TO	DETAILS

DATE	PERSON SPOKEN TO	DETAILS