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X INVOICE

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Copy Tax Invoice

DIAGEO

Building 3, Maxwell Park, Magwa Crescent, Waterfall
City, Midrand, 2090
Vat Reg: 4750101802 NLA: RG00000525
Customer Service Telephone: 0800 600 230

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Order Number 746183150	SAP Order 117214539	Sap Order Date 05.02.2024	Account Number 198397	GRV Required YES
Order Date 7.02.2024	PO Number 4734603349@11h00	Delivery Date 05.02.2024	Plant / Bay CNS	Order type Duty Paid
Order Address PICK N PAY DC PHILLIPI MAOS, NEW OTTERY & WOODLANDS ROADS, 7800, Ottery		Delivery Address DISTRIBUTION CENTRE (G) PHILLIPI CNR OLD LANSOWNE & OTTERY ROS 7800, Ottery		
Payment Terms 30 days from statement		Bank : CITIBANK N A SOUTH AFRICA SANDTON 0200079094 / 350005		
Customer VAT Number: 4050105588				

Product	Description	QTY	UOM	List Price	Customer Discount	Promotional Discount	Amount excl Vat	Vat	Amount incl Vat
393	Gordons Dry Gin 20cl	30	CAS	512.64			15,379.20	2,306.88	17,686.08
506	Gordons Dry Gin 5cl	10,000	CAS	OUT OF STOCK					

ANY RETURNS MUST BE NOTED ON THIS DOCUMENT AND ITS COPY

Order Notes	Receipt From Diageo	Name	Signature	Date
ES:	Receipt From Customer	Name	Signature	Date
Taxable Value Rand 15,379.20		Vat Rate 15 %		
Tax Amount Rand 2,306.88		Total Due 17,686.08		
ESD 0.00		Currency ZAR		

PR

From: Diageo South Africa (Pty) Ltd
Magwa Crescent West
MIDRAND
2090
Tel: 0100038100
Fax: 0100038100

To: Philippi DC Groceries
ERF 40 Springfield, Ottery Rd
PHILIPPI
7935
Tel: 021 690 2400
Fax:

Vendor Number: 1000008108
EWM Delivery Number: 11537567
Goods Receipt Number: 187682339
Purchase Order Number: 4734603349
Vendor Invoice Number: 0187682339

Company Reg No: 1973/004739/07
VAT Reg Number: 4090105588

Article Number	Description	Barcode	UoM	Received Qty	Pack Size	Mixed Lug
168499	GORDON'S GIN 200ML	6001496040178	CS	30 ✓	12 ✓	
103179	GORDON'S GIN 50ML	6001496040024	CK		12	

Total Qty Received 30

Packaging Material for Non Mixed Lug articles

Pack Mat Nr.	Description	Received Qty	THAN Ref Nr
476536	CHEP PALLET (BLUE) 1EA	16	4242303370

Pick n Pay	PHDC GROC
RECEIVING	
DATE:	09 FEB 2024
PRINT NAME:	<i>[Signature]</i>
SIGN:	<i>[Signature]</i>

Received by:
Checked By Senior Receiving Manager:
Driver's Name:
Driver's ID No / Driver's Licence No:
Vehicle Registration:

KSTAGG025 (KASHIEFA STAGGIE)

_____ Name (print)	_____ Signature
_____ Name (print)	_____ Signature
_____	_____
_____	_____