

PROFUMI D'ITALIA MARKETING CC
Importers & Distributors of Italian liquors

82 Ascot Road
Milnerton
7441
Cape Town

BOTTEGA
WATERFRONT DRIVE

CK: 200512646223
VAT: 4890229612
TEL: 0027 21 554 4831
CELL: 0027 81 357 0419
Liquor License: RG0002675
Online License: WCP/043548
Orders: ordersgauteng@profumi.co.za
Accounts: accounts@profumi.co.za

Tax Invoice

Date 13/01/25

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Document No IT5957

Picardi Rebel (Deliver Knysna)

Creditors Dept
53 Commercial St
CApe Town 8000
email: creditors3@picardirebel
.co.za ph 0214693300 Michael

**TERMS: 30 Days from
Invoice**

Deliver to

Shop no 3
Fruit & Veg Centre
Waterfront Drive
Knysna
6571

Account	Your PO Number	Tax Reference	Sales Code
PICARD	JODEE	4040134878	KO&MO

Code	Store	Description	Quantity	Unit Price	Net Value (ex Vat)	Disc%	VAT	Total (inc Vat)
1084	LC	Bottega Extra Dry Millesimato 750ml	6	149.99	899.94		134.99	1,034.93
1088	LC	Bottega Extra Dry Prosecco DOC 750ml	6	242.38	1,454.28		218.14	1,672.42
2081	LC	Bottega Prosecco Rose DOC 750ml	6	242.38	1,454.28		218.14	1,672.42

Liquor Runner Cape Town cc.
is a registered National Distributor
REG. NO. RG004327

Payment is due strictly as per account terms.

Ownership is not transferred until amount due is paid

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

Goods must be returned in a saleable condition

A handling fee of R75.00 will be charged on all returns.

BANK DETAILS: PROFUMI D'ITALIA MARKETING CC

First National Bank : Universal Branch Code 250 655

FNB Tableview

Acc No: 62096729 169

Please use your account code as your reference

for payments: PICARD

Sub Total	3,808.50
Discount @ 0.00%	0.00
Amount Excl Tax	3,808.50
Tax	571.27
Total	4,379.77

Received in good order

Signed

Date

Print name

16.01.25

Totter

ST koeriers



PROTON ROAD 12
TRIANGLE FARM
STIKLAND

TEL: 021 948 1510 / 021 948 1511
FAKS/FAX: 021 948 1754
SEL/CELL: 082 823 2872
079 898 6131

Fast and efficient - Vinnig en doeltreffend
VAT/BTW 4520156276

AAN: ONTVANGER / TO: CONSIGNEE

CC 96011820/23

VAN: AFSENDER / FROM: SENDER

NAAM/NAME: _____
ADRES/ADDRESS: _____

NAAM/NAME: _____
ADRES/ADDRESS: _____

KONTAK/CONTACT: _____

KBA / COD ☐ REKENING / ACCOUNT ☐
GEWIG/MASSA BEDRAG/AMOUNT

KONTAK/CONTACT: _____

AFSENDER / SENDER ☐ ONTVANGER / CONSIGNEE ☐

VOL. L B H

BETAAL DEUR / PAID BY: _____

BESKRYWING/DESCRIPTION

AANTAL/QTY

VERSEKERING/INSURANCE

ADMIN

BTW/VAT

TOTAAL/TOTAL

CONFIRMATION THAT GOODS WERE
RECEIVED IN GOOD ORDER.

NAAM IN DRUKSKRIJF/NAME IN BLOCK LETTERS

HANDEKENING/SIGNATURE

TYD/TIME

Branch: Paarl Branch Code: 632005

FAKTUUR NO./INVOICE NO. _____

BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED
TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL.

KOERIER HANDEKENING /
COURIER SIGNATURE

DATUM/DATE

AFSENDER HANDEKENING /
SENDER SIGNATURE

DATUM/DATE

1. WIT - KANTOOR

2. PINK - BELASTINGFAKTUUR

3. BLOU - ONTVANGER

4. GEEL - AFSENDER

Bank Details: Name: ST Koeriers

Bank: ABSA BANK

Account no: 400149933

Acc Type: Cheque Account

FormIdeation 082 893 1197 Item No F57797 (01/22)