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

82 Ascot Road
Milnerton
7441
Cape Town

BOTTEGA

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	13/11/24
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Document No	IT5123

Legacy Liquors
SA Liquor Distributors PTY LTD
t/a Legacy Liquors
Unit 8, Ludel Park
Ludel Close ,Montague Gardens
Liq Lic #NLA 21777

TERMS: 30 Days from Invoice

Deliver to

Legacy Liquors
Unit 8, Ludel Park
Ludel Close
Montague Gardens
7441

Account	Your PO Number	Tax Reference	Sales Code
LEGACY	DOC ID 000000091		MO

Code	Store	Description	Quantity	Unit Price	Net Value (ex Vat)	Disc%	VAT	Total (inc Vat)
1009	LC	Bottega Limoncino-Limoncello 500ml	6	290.86	1,745.16		248.69	1,906.59

LEGACY LIQUORS

RECEIVED BY: .....

DATE: 14/11/24

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: LEGACY

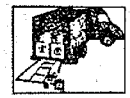
Sub Total	1,745.16
Discount @ 5.00%	87.26
Amount Excl Tax	1,657.90
Tax	248.69
Total	1,906.59

Received in good order
Signed _____ Date 14/11/24
Print name _____

57

ST Koeriers Couriers

Fast and efficient - Vinnig en doeltreffend



Belastingfaktuur / Tax Invoice

6532535

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

CC 96011820/23 VAT/BTW 4520156276

VAN: AFSENDER / FROM: SENDER	AAN: ONTVANGER / TO: CONSIGNEE
NAAM/NAME:	NAAM/NAME:
ADRES/ADDRESS:	ADRES/ADDRESS:
KONTAK/CONTACT:	KONTAK/CONTACT:

BETAAL DEUR / PAID BY: AFSENDER / SENDER ☐ ONTVANGER / CONSIGNEE ☐ KBA / COD ☐ REKENING / ACCOUNT ☐

AANTAL/QTY	BESKRYWING/DESCRIPTION	VOL	L	B	H	GEWIG/MASSA	BEDRAG/AMOUNT

LIABILITY INSURANCE | JA/YES ☐ | NEE/NO ☐ | WAARDE/VALUE | VERSEKERING/INSURANCE

FAKTUUR NO./INVOICE NO.

ADMIN	
BTW/VAT	
TOTAAL/TOTAL	

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

CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD ORDER.

NAAM IN DRUKSKRIF/NAME IN BLOCK LETTERS

HANDTEKENING/SIGNATURE

TYD/TIME DATUM/DATE

KOERIER HANDTEKENING / COURIER SIGNATURE DATUM/DATE

AFSENDER HANDTEKENING / SENDER SIGNATURE DATUM/DATE

1. WIT - KANTOOR 2. PINK - BELASTINGFAKTUUR 3. BLOU - ONTVANGER 4. GEEL - AFSENDER

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

Bank Details: **Name:** ST Koeriers **Bank:** ABSA BANK **Account no:** 400149933 **Acc Type:** Cheque Account **Branch:** Paarl **Branch Code:** 632005