

23
PROFUMI D'ITALIA MARKETING CC
Importers & Distributors of Italian liquors

82 Ascot Road
 Milnerton
 7441
 Cape Town

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

BOTTEGA

Takealot Online (RF) (PTY) Ltd

P.O Box 7628
 Raggebaai
 8012

**TERMS: 30 Days from
 Invoice**

Tax Invoice

Date 30/10/24
 Page 1
 Document No IT4923

Deliver to

Unit 7-8
 West Building North Precinct
 Topaz Boulevard
 Montague Gardens
 CapeTown

Account	Your PO Number	Tax Reference	Sales Code
TAKEAL	ORDER NO 1255866563 CPT	4470208333	GA

Code	Store	Description	Quantity	Unit Price	Net Value (ex Vat)	Disc%	VAT	Total (inc Vat)
1001	LC	Grappa Alexander Bianca 750 ml	6	469.00	2,814.00		422.10	3,236.10



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.

Sub Total	2,814.00
Discount @ 0.00%	0.00
Amount Excl Tax	2,814.00
Tax	422.10
Total	3,236.10

Received in good order

Signed _____ Date _____

Print name _____

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: TAKEAL

Belastingfaktuur / Tax Invoice



PROTON ROAD 12
TRIANGLE FARM
ATKINSON

TEL: 021 948 1510 / 021 948 1511
FAKS/FAX: 021 948 1754
SELICELL: 082 823 2872
SELICELL: 070 898 6134

210

Koeriers Couriers

Fast and efficient - Vinnig en doeltreffend
VATIBTW 45201556276
CC 96011820/23
VAN: AFSENDER / FROD

CC 96011821

NAAM/NAME: —
ADRES/ADDRESS:

VAN. A. 31

AAN: ONTVANGER / TO: CONSIGNEE
079 898 010

NAAM/NAME: _____
ADRES/ADDRESS: _____

KONTAK / CONTACT: _____ KBA / COD REKENING / ACCOUNT
 BEDRAG / AMOUNT

KONTAK / CONTACT	AFSENDER / SENDER
BETAAL DEUR / PAID BY:	BESKRYWING / DESCRIPTION

LIABILITY INSURANCE JAMES

DATUM/DATE	AFSENDER SENDER SIGNATURE	A GEEL - AFSENDER	AFSENDER HANDTEKENING / HANDTEKENING /	DATUM/DATE
			TYD/TIME	DATUM/DATE
			Branch: Pearl	Branch Code: 632005

NAAM IN DRUKSKRIFT/NAME IN BLOCK LETTERS

TOTAAL/TOTAL
CONFIRMATION THAT GOODS WERE
IN GOOD ORDER.

FAKTUUR NO./INVOICE NO. 57797 (01/22)

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

Formidealde 062 893 1197		Handtekening	
		DATUM/DATE	DATUM/DATE
		AFSENDER	HANDELERKING /
		SENDER SIGNATURE	DATUM/DATE
KOERIER HANDTEKENING /		DATUM/DATE	HANDELERKING /
COURIER SIGNATURE		AFT/DATE	DATUM/DATE
1. WIT - KANTOOR		1. WIT - KANTOOR	1. WIT - KANTOOR
2. PINK - BELASTINGFAKTUUR		2. PINK - BELASTINGFAKTUUR	2. PINK - BELASTINGFAKTUUR
Bank: ABSA BANK		Bank: ABSA BANK	Bank: ABSA BANK
Bank Details: Name: ST Koeriers		Account no: 400149933	Acc Type: Cheque Account

Na E57797 (01/22)