

TAX INVOICE COPY



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Customer PnP Philippi Distribution Centre MA05
VAT No. 4090105588
Liquor License No. RG0002738
Bill to Cust No. PNP999
Sell to Cust No. PNPPHI
Delivery Address: PnP Philippi Distribution Centre MA05
Pick n Pay Retailers (Pty) Ltd
Phillippi
Erf 40 Springfield
Ottery Road 7
Cape Town, Western Cape 7935

Contact Name
Contact No.

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 - 4747523412

Invoice No.	PS11166467	Posting Date	30/12/2024	Payment Terms	33 Days from Statement
SO No.	SO1280176	Due Date	03/02/2025	Promised Delivery Date	31/12/2024

Code	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Discount %	Total Excl. VAT
CRAFT LIQUOR MERCHANTS						
ESMGSOR	Gin Society Original	50	06 x 750ml	886.92		44,346.00
Craft Liquor Merchants Total						44,346.00
Total ZAR Excl. VAT						44,346.00
15% VAT						6,651.90
Total ZAR Incl. VAT						50,997.90

Liquor Runner Cape Town (Pty) Ltd
is a registered National Distributor
REG. NO. RG0005535

Thanks for your business.

BANKING DETAILS

Acc Name: Meridian Wine Distribution (Pty) Ltd	Branch: 250 655	Swift: FIRNZAJJ
Bank Name: First National Bank	Acc No: 62 204 833 744	



Call Us
0861 113 959



Email Us
orders@groupmeridian.co.za



Customer Service
query@groupmeridian.co.za

From: Cool Wines
PO Box 855
MARLBOROUGH
2128
Tel: +27115314700
Fax: 0865544967

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

Vendor Number: 1000002895
EWM Delivery Number: 13181588
Goods Receipt Number: 1800278939
Purchase Order Number: 4747523412
Vendor Invoice Number: PSI1166467

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

Article Number	Description	Barcode	UoM	Received Qty	Pack Size	Mixed Lug
890873	GIN SOCIETY ORIGINAL 750ML	6009642059456	CS	50	6	

Total Qty Received 50

Pick n Pay PHDC GRUC
RECEIVING

DATE: 31 DEC 2024
PRINT NAME: *[Signature]*
SIGN: *[Signature]*

Received by:

Checked By Senior Receiving Manager:

Driver's Name:

Driver's ID No / Driver's Licence No:

Vehicle Registration:

NSOLAN765 ()

Name (print)	Signature
Name (print)	Signature