

TAX INVOICE COPY



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Customer PnP Cavendish WC50
VAT No. 4090105588
Liquor License No. WCP/039251
Bill to Cust No. PNP999
Sell to Cust No. PPSCAV
Delivery Address: PnP Cavendish WC50
Pick n Pay Retailers (Pty) Ltd
Claremont
Cavendish Square Shop L37
Dreyer Street
Cape Town, Western Cape 7708
Contact Name Abdur Raheem Hoosen
Contact No. 021-673-3460

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 - 4739313565

Invoice No.	PSI1084229	Posting Date	11/06/2024	Payment Terms	33 Days from Statement
SO No.	SO1186815	Due Date	02/08/2024	Promised Delivery Date	12/06/2024

Code	Description	Quantity	Unit of Measure	Unit Price Excl. VAT	Discount %	Total Excl. VAT
CRAFT LIQUOR MERCHANTS						
ESMCORGRE	ESM Grenadine Cordial	1	12 x 750ml	487.32		487.32
Craft Liquor Merchants Total						487.32
Total ZAR Excl. VAT						487.32
15% VAT						73.10
Total ZAR Incl. VAT						560.42

Liquor Runner Cape Town (Pty) Ltd
is a registered National Distributor
REG. NO. RG004327

Thanks for your business.

BANKING DETAILS

Acc Name: Meridian Wine Distribution (Pty) Ltd
Bank Name: First National Bank

Branch: 250 655
Acc No: 62 204 833 744

Swift: FIRNZAJJ



Call Us

0861 113 959



Email Us

orders@groupmeridian.co.za



Customer Service

query@groupmeridian.co.za

From: Cool Wines

Sparten Crescent
Marlborough
2090
Tel: +27115314700
Fax: 0865544967

To: Cavendish
Pick n Pay Retailers (Pty) Ltd
Cavendish
Claremont
7785
Tel: 021 673 3460
Fax:

Vendor Number: 1000002895

Site No: WC50

Goods Receipt Number: 5004741240
Purchase Order Number: 4739313565
Purchase Order Date: 04.06.2024
Vendor Invoice Number: PSI1084229
Reference:

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

Fixed Weight Items

Vendor Prod Code	Article Number	Description	Barcode	UoM	Received Qty	Pack Size
GR1	244029	ESM GRENADINE CORDIAL 750ML	6009642050729	CS	1	12

Total Qty Received 1

Received by:

Checked By Senior Receiving Manager:

Driver's Name:

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

Vehicle Registration:

JBAILEY766 (Judith Bailey)

JUDITH BAILEY#####

Name (print)

Signature

Name (print)

Signature

