



Building 6, Country Club Estate, 21 Woodlands Drive
Woodmead, Sandton, GAUTENG, 2191
Phone: 011 802 0600 Fax: 011 802 0620
Reg No: 1994/004226/07
Vat No: 4670144973



Tax Invoice

Buyer: Erarite (Pty) Ltd
Tops Crawford 36104
Sh 1 2 Taronga Road
cnr Bridge Way
Crawford 7780

Consignee:
Tops Crawford 36104
Sh 1 2 Taronga Road
cnr Bridge Way
Crawford 7780

Doc No: 1533843
Date: 2024-12-30
Customer: 62891
Branch / Plant: CPTD
Warehouse LL: RG/0004327
Order No: 1401738 SO
Liquor License: WCP/002908

Buyer's VAT: 4540266212

Requested Date: 2024-12-30

Customer PO: 43851

Currency: ZAR

Payment Term: 15 Days from
statement 1.0%

Item number	Description	UoM	Qty	Unit Selling Price	Discount	VAT	Total Amount
101831	Jameson Whiskey Std 50ml 10x(12x50ml) 43% 9.0667	PK	1.00	255.48	-9.07	36.96	246.41
101200	Jameson Whiskey Std 24x200ml 43% 3.0222	CA	1.00	85.16	-3.02	295.70	1,971.31
101550	Jameson Whiskey Std 12x1000ml 43% 15.1111	CA	1.00	425.79	-15.11	739.22	4,928.15
141930	Malfy Con Arancia 6x750ml 43% 4.2500	EA	6.00	349.62	-4.25	310.83	2,072.22
148103	Kahlua 12x750ml 16% 1.8333	EA	3.00	235.65	-1.83	105.22	701.45
152201	Chivas Regal 18YO 6x750ml 43% 3.5000	EA	1.00	985.69	-3.50	147.33	982.19
270501	Martell VS 12x750ml 40% 25.0000	EA	2.00	414.75	-25.00	116.92	779.49
200000	Absolut Lime 12x750ml 40% 14.9167	EA	4.00	248.73	-14.92	140.29	935.25

Banking Details

Bank: Citibank ZAR
Account No: *****6023
Branch SOUTH AFRICA



Received in good order on behalf of customer

Name: _____
Signature: _____
Date: _____

Pernod Ricard
South Africa

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200202	Absolut Vodka Std 12x750ml 43% 14.9167	EA	24.00	248.73	-14.92	841.73	5,611.52
101475	Jameson Whiskey Std 12x375ml 43% 5.6667	CA	1.00	159.67	-5.67	277.21	1,848.04
146802	Malibu Pineapple 12x750ml 21% 10.2500	EA	6.00	158.43	-10.25	133.36	889.08
						Total VAT	Total Including
						3,144.77	24,109.88
						COD Total	23,868.79

Banking Details

Bank: Citibank ZAR
Account No: *****6023
Branch: SOUTH AFRICA



CRAWFORD TOPS

Received in good order and RECEIVED

TEL. 021 697 2049 STORE CODE: 36104
Name: _____
Signature: _____
Date: _____
DATE 08/01/25 **TIME:** _____
GRV NO: _____ **CLAIM NO:** _____
NAME (PRINT): _____
SIGN: _____