

**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

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1985

Spar Western Cape Consolidated Account  
 P O Box 18294  
 Wynberg 7824

ATTENTION: Anthea Julie  
 Email: creditors.wc@spar.co.za

**TERMS: 30 Days from Invoice**

Deliver to

Tops Village Square 36090  
 Cnr Oxford & Queen Str  
 Village Square  
 Durbanville  
 VAT # 4340230699

| Account | Your PO Number            | Tax Reference | Sales Code |
|---------|---------------------------|---------------|------------|
| SPARWC  | 36090 TOPS VILLAGE SQUARE |               | MO         |

| Code | Store | Description                            | Quantity | Unit Price | Net Value (ex Vat) | Disc%  | VAT    | Total (inc Vat) |
|------|-------|----------------------------------------|----------|------------|--------------------|--------|--------|-----------------|
| 1082 | LC    | Bottega Prosecco Pronol DOC 750ml      | 3        | 219.99     | 659.97             |        | 99.00  | 758.97          |
| 1083 | LC    | (Pink Manzoni) Rose Gold Moscato 750ml | 3        | 495.00     | 1,485.00           |        | 222.75 | 1,707.75        |
| 2084 | LC    | White-Coresei Pinot Grigio 750ml       | 6        | 99.00      | 594.00             |        | 89.10  | 683.10          |
| 2084 | LC    | White-Coresei Pinot Grigio 750ml       | 1        | 99.00      | 0.00               | 100.00 | 0.00   | 0.00            |
| 2085 | LC    | Red- Vino Novello Breganze 750ml       | 6        | 99.00      | 594.00             |        | 89.10  | 683.10          |
| 2085 | LC    | Red- Vino Novello Breganze 750ml       | 1        | 99.00      | 0.00               | 100.00 | 0.00   | 0.00            |
| 2101 | LC    | Coresei Merlot 750ml                   | 6        | 109.00     | 654.00             |        | 98.10  | 752.10          |
| 2101 | LC    | Coresei Merlot 750ml                   | 1        | 109.00     | 0.00               | 100.00 | 0.00   | 0.00            |

Order by Norman

*[Handwritten signature]*  
 18.03.24

*[Handwritten signature]*  
 Liquor - Profumi d'Italia Marketing CC  
 is a partner of Universal Distribution  
 1801 1801 6663000000

**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: SPARWC

|                  |                 |
|------------------|-----------------|
| Sub Total        | 3,986.97        |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 3,986.97        |
| Tax              | 598.05          |
| <b>Total</b>     | <b>4,585.02</b> |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**PROFUMI D'ITALIA MARKETING CC**  
**Importers & Distributors 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 14/03/24

Page 1

Document No IT1970

Spar Western Cape Consolidated Account  
P O Box 18294  
Wynberg 7824

ATTENTION: Anthea Julie  
Email: creditors.wc@spar.co.za

**TERMS: 30 Days from  
Invoice**

Deliver to

Tops Village Square 36090  
Cnr Oxford & Queen Str  
Village Square  
Durbanville  
VAT # 4340230699

| Account | Your PO Number               | Tax Reference | Sales Code |
|---------|------------------------------|---------------|------------|
| SPARWC  | 36090 TOPS VILLAGE<br>SQUARE |               | MO         |

| Code | Store | Description                                                              | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|--------------------------------------------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1009 | LC    | Bottega Limoncino-Limoncello 500ml<br>Order by Norman<br>Back order done | 6        | 290.86     | 1,745.16           |       | 261.77 | 2,006.93        |

18.03.24

Profumi D'Italia Marketing CC  
Is a Registered General Distributor  
VAT No: 4890229612

30

Payment is due strictly as per account terms.  
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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 Please use your account code as your reference  
Acc No: 62096729 169 for payments: SPARWC

|                  |          |
|------------------|----------|
| Sub Total        | 1,745.16 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 1,745.16 |
| Tax              | 261.77   |
| Total            | 2,006.93 |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**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

**Tax Invoice**

Date 12/03/24

Page 1

Document No IT1903

Willoughby & Co Pty Ltd  
 Willoughby & Co Pty Ltd  
 P.O.Box 51036  
 V & A Waterfront  
 Capetown,8002  
 Liq Lic:WCP 021978

**TERMS: 30 Days from  
 Invoice**

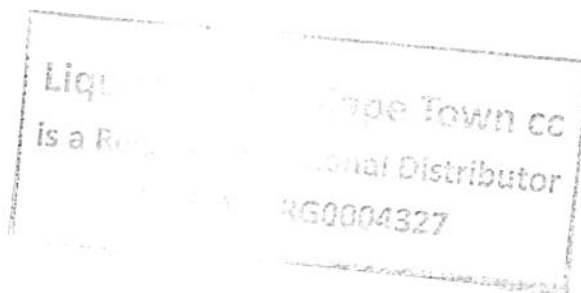
Deliver to

Willoughby & Co Pty Ltd  
 Shop 6132  
 V7A Waterfront  
 Capetown

| Account | Your PO Number | Tax Reference | Sales Code |
|---------|----------------|---------------|------------|
| WILLOU  | RENE           | 4340162983    | KO&MO      |

| Code | Store | Description                             | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-----------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1011 | LC    | Prosecco Brut Bottega 750ml             | 6        | 217.38     | 1,173.85           | 10.00 | 176.08 | 1,349.93        |
| 1081 | LC    | Bottega Millesimato Spumante Brut 750ml | 6        | 139.99     | 839.94             |       | 125.99 | 965.93          |

*Collection Invoice*



**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: WILLOU

|                  |                 |
|------------------|-----------------|
| Sub Total        | 2,013.79        |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 2,013.79        |
| Tax              | 302.07          |
| <b>Total</b>     | <b>2,315.86</b> |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**PROFUMI D'ITALIA MARKETING CC**  
**Importers & Distributors 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 12/03/24

Page 1

Document No IT1903

Willoughby & Co Pty Ltd  
Willoughby & Co Pty Ltd  
P.O.Box 51036  
V & A Waterfront  
Capetown,8002  
Liq Lic:WCP 021978

**TERMS: 30 Days from  
Invoice**

Deliver to

Willoughby & Co Pty Ltd  
Shop 6132  
V7A Waterfront  
Capetown

|         |                |               |            |
|---------|----------------|---------------|------------|
| Account | Your PO Number | Tax Reference | Sales Code |
| WILLOU  | RENE           | 4340162983    | KO&MO      |

| Code | Store | Description                             | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-----------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1011 | LC    | Prosecco Brut Bottega 750ml             | 6        | 217.38     | 1,173.85           | 10.00 | 176.08 | 1,349.93        |
| 1081 | LC    | Bottega Millesimato Spumante Brut 750ml | 6        | 139.99     | 839.94             |       | 125.99 | 965.93          |

**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: WILLOU

|                  |          |
|------------------|----------|
| Sub Total        | 2,013.79 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 2,013.79 |
| Tax              | 302.07   |
| Total            | 2,315.86 |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

## **Sandra Erasmus**

---

**From:** office@profumiditalia.co.za  
**Sent:** Tuesday, 19 March 2024 11:24  
**To:** Sandra Erasmus  
**Subject:** FW: Tax Invoice IT1903  
**Attachments:** Tax Invoice IT1903.PDF

Hello Sandra

Please note this invoice must not go out for the delivery , this is to correct lc stock count and charge the customer correctly as he received the stock on the credited invoice , apologies as I forgot to tell you .

Thank you .

**From:** office@profumiditalia.co.za <office@profumiditalia.co.za>  
**Sent:** Tuesday, March 12, 2024 11:42 AM  
**To:** 'orderswcape@profumi.co.za' <orderswcape@profumi.co.za>  
**Subject:** Tax Invoice IT1903

Tax Invoice IT1903 from PROFUMI D'ITALIA MARKETING CC

Good day

Please find the attached

Thank you .

NG CC  
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

Tax Invoice

Date 14/03/24

Page 1

Document No IT1953

Tops @ The Acres  
Private Bag 60576  
Port Elizabeth  
6045

TERMS: 30 Days from  
Invoice

Deliver to

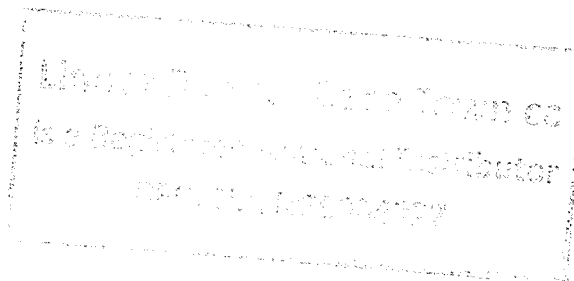
Norvic Drive  
Perridgevale  
Port Elizabeth

Liq Lic: ECP20796

|         |                  |               |            |
|---------|------------------|---------------|------------|
| Account | Your PO Number   | Tax Reference | Sales Code |
| TOPACR  | TOPS @ THE ACRES | 4820260505    | MO         |

| Code | Store | Description                             | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT   | Total (inc Vat) |
|------|-------|-----------------------------------------|----------|------------|--------------------|-------|-------|-----------------|
| 1006 | LC    | Bottega Fior di Latte (White Choc)500ml | 1        | 290.86     | 290.86             |       | 43.63 | 334.49          |
| 1009 | LC    | Bottega Limoncino-Limoncello 500ml      | 2        | 290.86     | 581.72             |       | 87.26 | 668.98          |
| 1056 | LC    | Grappa Gianduia (hazelnut choc) 500ml   | 1        | 290.86     | 290.86             |       | 43.63 | 334.49          |

Order by Farida



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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: TOPACR

|                  |          |
|------------------|----------|
| Sub Total        | 1,163.44 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 1,163.44 |
| Tax              | 174.52   |
| Total            | 1,337.96 |

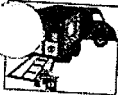
Received in good order

Signed

Date 15.3.24

Print name

Jayson



**Belastingfaktuur / Tax Invoice**

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

**2748215**

ist and efficient - Vinnig en doeltreffend  
1996/011820/23 VAT/BTW 4520156276

|                                                                                                                                                      |  |                                                         |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------|--|
| VAN: AFSENDER / OFF-SENDER                                                                                                                           |  | AAN: ONTVANGER / TO: CONSIGNEE                          |  |
| /NAME: <u>AFSENDER</u>                                                                                                                               |  | NAAM/NAME: <u>ONTVANGER</u>                             |  |
| S/ADDRESS: <u>AFSENDER</u>                                                                                                                           |  | ADRES/ADDRESS: <u>ONTVANGER</u>                         |  |
| K/CONTACT: <u>AFSENDER</u>                                                                                                                           |  | KONTAK/CONTACT: <u>ONTVANGER</u>                        |  |
| AL DEUR / PAID BY: AFSENDER / SENDER <input type="checkbox"/>                                                                                        |  | ONTVANGER / CONSIGNEE <input type="checkbox"/>          |  |
| BESKRYWING/DESCRIPTION                                                                                                                               |  | REKENING / ACCOUNT                                      |  |
| VOL. L B H                                                                                                                                           |  | GEWIG/MASSA BEDRAG/AMOUNT                               |  |
| 1. <u>AFSENDER</u>                                                                                                                                   |  |                                                         |  |
| 2. <u>ONTVANGER</u>                                                                                                                                  |  |                                                         |  |
| 3. <u>AFSENDER</u>                                                                                                                                   |  |                                                         |  |
| 4. <u>ONTVANGER</u>                                                                                                                                  |  |                                                         |  |
| ERING/INSURANCE JA/YES <input type="checkbox"/>                                                                                                      |  | NEE/NO <input type="checkbox"/>                         |  |
| WAARDE/VALUE                                                                                                                                         |  | LIABILITY INSURANCE                                     |  |
| R NO./INVOICE NO. <u>2748215</u>                                                                                                                     |  | ADMIN                                                   |  |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL |  | BTW/VAT                                                 |  |
|                                                                                                                                                      |  | TOTAAL/TOTAL                                            |  |
|                                                                                                                                                      |  | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |  |
| ER HANDTEKENING / RIER SIGNATURE                                                                                                                     |  | NAAM IN DRUKSKRIF / NAME IN BLOCK LETTERS               |  |
| DATUM/DATE                                                                                                                                           |  | HANDTEKENING/SIGNATURE                                  |  |
| AFSENDER HANDTEKENING / SENDER SIGNATURE                                                                                                             |  | DATUM/DATE                                              |  |
| ANTOOR 2. PINK - BELASTINGFAKTUUR 3. BLOU - ONTVANGER 4. GEEL - AFSENDER                                                                             |  | TYD/TIME                                                |  |
| ails: Name: ST Koeriers Bank: ABSA BANK Account no: 400149933 Acc Type: Cheque Account Branch: Paarl Branch Code: 632005                             |  | DATUM/DATE                                              |  |

**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

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1965

*87.2748221*

Tops Beacon Isle 46194  
 P O Box 9596  
 George  
 6529  
 Liq Lic: WCP/011200

**TERMS: 30 Days from Invoice**

Deliver to

Beacon Isle Crescent  
 Plettenberg Bay  
 6600

Liq Lic: WCP/011200

| Account | Your PO Number   | Tax Reference | Sales Code |
|---------|------------------|---------------|------------|
| TOPBEA  | TOPS BEACON ISLE | 4130183025    | KO&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           |       | 261.77 | 2,006.93        |
| 2081            | LC    | Bottega Prosecco Rose DOC 750ml    | 6        | 242.38     | 1,454.28           |       | 218.14 | 1,672.42        |
| Order by Elaine |       |                                    |          |            |                    |       |        |                 |

*Liquor Runner Cape Town cc  
 is a Registered National Distributor  
 REG. No: RG0004327*

**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: TOPBEA

|                  |                 |
|------------------|-----------------|
| Sub Total        | 3,199.44        |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 3,199.44        |
| Tax              | 479.91          |
| <b>Total</b>     | <b>3,679.35</b> |

Received in good order

Signed *[Signature]* Date *15:3:24*

Print name *Jayson*



Fast and efficient - Vinnig en doeltreffend

CC. 1996/011820/23 VAT/BTW 4520156276

# Belastingfaktuur / Tax Invoice

PROTON ROAD 12 TEL: 021 948 1510 / 021 948 1511  
 TRIANGLE FARM FAKS/FAX: 021 948 1754  
 STIKLAND SEL/CELL: 082 823 2872  
 079 898 6131

2748221

|                                                                   |                        |                                                |                                 |                                             |   |                                                         |               |
|-------------------------------------------------------------------|------------------------|------------------------------------------------|---------------------------------|---------------------------------------------|---|---------------------------------------------------------|---------------|
| VAN / AFSENDER / OFF / SENDER                                     |                        |                                                |                                 | AAN / ONTVANGER / TO / CONSIGNEE            |   |                                                         |               |
| NAAM/NAME: <u>ST Koeriers</u>                                     |                        |                                                |                                 | NAAM/NAME: <u>WILSON &amp; Co</u>           |   |                                                         |               |
| ADRES/ADDRESS: <u>CH 27, 1770 3</u>                               |                        |                                                |                                 | ADRES/ADDRESS: <u>1770 3, 1770 3</u>        |   |                                                         |               |
| KONTAK/CONTACT: <u>ONE TOWN</u>                                   |                        |                                                |                                 | KONTAK/CONTACT: <u>6600</u>                 |   |                                                         |               |
| BETAAL DEUR / PAID BY: AFSENDER / SENDER <input type="checkbox"/> |                        | ONTVANGER / CONSIGNEE <input type="checkbox"/> |                                 | KBA / COD <input type="checkbox"/>          |   | REKENING / ACCOUNT <input type="checkbox"/>             |               |
| AANTAL/QTY                                                        | BESKRYWING/DESCRIPTION | VOL                                            | L                               | B                                           | H | GEWIG/MASSA                                             | BEDRAG/AMOUNT |
|                                                                   | <u>10 kgp kookolie</u> |                                                |                                 |                                             |   |                                                         |               |
|                                                                   | <u>10 kgp kookolie</u> |                                                |                                 |                                             |   |                                                         |               |
| VERSEKERING/INSURANCE                                             |                        | JAYES <input type="checkbox"/>                 | NEE/NO <input type="checkbox"/> | WAARDE/VALUE                                |   | LIABILITY INSURANCE                                     |               |
| FAKTUUR NO./INVOICE NO.                                           |                        | <u>271765</u>                                  |                                 |                                             |   | ADMIN                                                   |               |
|                                                                   |                        |                                                |                                 |                                             |   | BTW/VAT                                                 |               |
|                                                                   |                        |                                                |                                 |                                             |   | TOTAAL/TOTAL                                            |               |
|                                                                   |                        |                                                |                                 |                                             |   | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |               |
|                                                                   |                        |                                                |                                 |                                             |   | NAAM IN DRUKSKRIF/<br>NAME IN BLOCK LETTERS             |               |
|                                                                   |                        |                                                |                                 |                                             |   | HANDTEKENING/SIGNATURE                                  |               |
| KOERIER HANDTEKENING /<br>COURIER SIGNATURE                       |                        | DATUM/DATE                                     |                                 | AFSENDER HANDTEKENING /<br>SENDER SIGNATURE |   | DATUM/DATE                                              |               |
| 1. WIT - KANTOOR                                                  |                        | 2. PINK - BELASTINGFAKTUUR                     |                                 | 3. BLOU - ONTVANGER                         |   | 4. GEEL - AFSENDER                                      |               |
| TYD/TIME                                                          |                        | DATUM/DATE                                     |                                 |                                             |   |                                                         |               |

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

**PROFUMI D'ITALIA MARKETING CC**  
**Importers & Distributors 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 14/03/24

Page 1

Document No IT1967

Prestons Mount Pleasant  
Prestons Mount Pleasant  
P O Box 786  
Port Elizabeth  
6000  
LL - ECP 11500

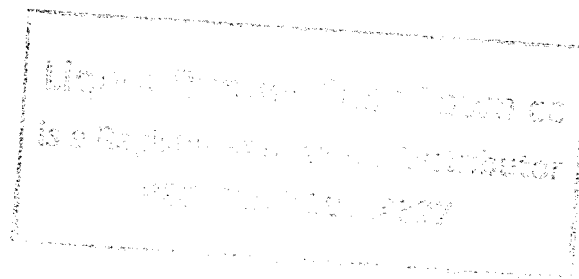
**TERMS: 30 Days from  
Invoice**

**Deliver to**

Prestons Mount Pleasant  
Cnr Genadendal & Buffelsfontein  
Mount Pleasant  
Port Elizabeth  
LL - ECP 11500

|         |                  |               |            |
|---------|------------------|---------------|------------|
| Account | Your PO Number   | Tax Reference | Sales Code |
| PRESMT  | ORDER NO PE44291 | 4710242761    | KO&MO      |

| Code | Store | Description                                               | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-----------------------------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1006 | LC    | Bottega Fior di Latte (White Choc)500ml<br>Order by Julie | 6        | 290.86     | 1,745.16           |       | 261.77 | 2,006.93        |



**Payment is due strictly as per account terms.**

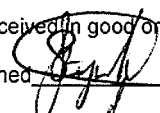
Ownership is not transferred until amount due is paid  
**Please keep this invoice to return any merchandise within 60 days.**  
Goods must be returned in a saleable condition  
**A handling fee of R75.00 will be charged on all returns.**

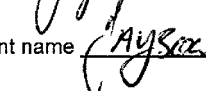
**BANK DETAILS: PROFUMI D'ITALIA MARKETING CC**

First National Bank : Universal Branch Code 250 655  
FNB Tableview Please use your account code as your reference  
Acc No: 62096729 169 for payments: PRESMT

|                  |          |
|------------------|----------|
| Sub Total        | 1,745.16 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 1,745.16 |
| Tax              | 261.77   |
| Total            | 2,006.93 |

Received in good order

Signed  Date 15: 3:24

Print name 



Fast and efficient - Vinnig en doeltreffend

CC 1996/011820/23 VAT/BTW 4520156276

# Belastingfaktuur / Tax Invoice

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

2748222

|                                                                                                                                                      |                        |                                                |   |                                             |   |                                             |               |
|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------------------------------|---|---------------------------------------------|---|---------------------------------------------|---------------|
| VAN: AFSENDER / OFF SENDER                                                                                                                           |                        |                                                |   | AAN: ONTVANGER / TO: CONSIGNEE              |   |                                             |               |
| NAAM/NAME: <u>XXXXXXXXXXXXXXXXXXXX</u>                                                                                                               |                        |                                                |   | NAAM/NAME: <u>XXXXXXXXXXXXXXXXXXXX</u>      |   |                                             |               |
| ADRES/ADDRESS: <u>XXXXXXXXXXXXXXXXXXXX</u>                                                                                                           |                        |                                                |   | ADRES/ADDRESS: <u>XXXXXXXXXXXXXXXXXXXX</u>  |   |                                             |               |
| KONTAK/CONTACT: <u>XXXXXXXXXXXXXXXXXXXX</u>                                                                                                          |                        |                                                |   | KONTAK/CONTACT: <u>XXXXXXXXXXXXXXXXXXXX</u> |   |                                             |               |
| BETAAL DEUR / PAID BY: AFSENDER / SENDER <input type="checkbox"/>                                                                                    |                        | ONTVANGER / CONSIGNEE <input type="checkbox"/> |   | KBA / COD <input type="checkbox"/>          |   | REKENING / ACCOUNT <input type="checkbox"/> |               |
| AANTAL/QTY                                                                                                                                           | BESKRYWING/DESCRIPTION | VOL                                            | L | B                                           | H | GEWIG/MASSA                                 | BEDRAG/AMOUNT |
| 1                                                                                                                                                    | XXXXXXXXXXXXXXXXXXXX   |                                                |   |                                             |   |                                             |               |
| 2                                                                                                                                                    | XXXXXXXXXXXXXXXXXXXX   |                                                |   |                                             |   |                                             |               |
| 3                                                                                                                                                    | XXXXXXXXXXXXXXXXXXXX   |                                                |   |                                             |   |                                             |               |
| VERSEKERING/INSURANCE                                                                                                                                |                        | JA/YES <input type="checkbox"/>                |   | NEE/NO <input type="checkbox"/>             |   | WAARDE/VALUE                                |               |
| FAKTUUR NO./INVOICE NO.                                                                                                                              |                        | 1967                                           |   | ADMIN                                       |   | BTW/VAT                                     |               |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL |                        |                                                |   | TOTAAL/TOTAL                                |   |                                             |               |
| CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION                                                                                              |                        |                                                |   | NAAM IN DRUKSKRIF/<br>NAME IN BLOCK LETTERS |   |                                             |               |
| KOERIER HANDTEKENING/<br>COURIER SIGNATURE                                                                                                           |                        |                                                |   | AFSENDER HANDTEKENING/<br>SENDER SIGNATURE  |   |                                             |               |
| DATUM/DATE                                                                                                                                           |                        |                                                |   | DATUM/DATE                                  |   |                                             |               |
| 1. WIT - KANTOOR                                                                                                                                     |                        |                                                |   | 2. PINK - BELASTINGFAKTUUR                  |   |                                             |               |
| 3. BLOU - ONTVANGER                                                                                                                                  |                        |                                                |   | 4. GEEL - AFSENDER                          |   |                                             |               |
| Bank Details: Name: ST Koeriers Bank: ABSA BANK Account no: 400149933 Acc Type: Cheque Account Branch: Paarl Branch Code: 632005                     |                        |                                                |   | TYD/TIME                                    |   |                                             |               |
|                                                                                                                                                      |                        |                                                |   | DATUM/DATE                                  |   |                                             |               |

WINELANDS MEDIA TEL: 021-871 1879

**ITALIA MARKETING CC**  
Distributors 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 14/03/24

Page 1

Document No IT1957

St Francis Blue Bottle Liquour  
St Francis Blue Bottle Liquors  
P O Box 55  
St Francis  
6312

**TERMS: 30 Days from  
Invoice**

Deliver to

162 St Francis Drive  
St Francis Bay  
St Francis Bay

| Account | Your PO Number | Tax Reference | Sales Code |
|---------|----------------|---------------|------------|
| STFRAN  | MARC           | 4230188767    | MO         |

| Code | Store | Description                             | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-----------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1009 | LC    | Bottega Limoncino-Limoncello 500ml      | 3        | 290.86     | 872.58             |       | 124.34 | 953.29          |
| 1081 | LC    | Bottega Millesimato Spumante Brut 750ml | 3        | 159.99     | 479.97             |       | 68.40  | 524.37          |
| 1084 | LC    | Bottega Extra Dry Millesimato 750ml     | 3        | 149.99     | 449.97             |       | 64.12  | 491.59          |
| 2027 | LC    | Bottega Grappa Barricata 1L             | 2        | 469.00     | 938.00             |       | 133.67 | 1,024.77        |
| 2086 | LC    | Bottega Grappa Bianco Aldo 1L           | 2        | 439.99     | 879.98             |       | 125.40 | 961.38          |



**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: STFRAN

|                  |                 |
|------------------|-----------------|
| Sub Total        | 3,620.50        |
| Discount @ 5.00% | 181.03          |
| Amount Excl Tax  | 3,439.47        |
| Tax              | 515.93          |
| <b>Total</b>     | <b>3,955.40</b> |

Received in good order

Signed

Date

15.3.24

Print name

Jayson



Fast and efficient - Vinnig en doeltreffend

CC 1996/011820/23 VAT/BTW 4520156276

Belastingfaktuur / Tax Invoice

PROTON ROAD 12  
TRIANGLE FARM  
STIKLAND

TEL: 021 948 1510 / 021 948 1511  
FAX/FAX: 021 948 1754  
SEL/CELL: 082 823 2872  
079 898 6131

2748217

27/1/2017

|                                                                   |                        |                                                                                                                                                      |   |                                             |   |                                                         |               |
|-------------------------------------------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------------------------------------------|---|---------------------------------------------------------|---------------|
| VAN: AFSENDER / OFF: SENDER                                       |                        | AAN: ONTVANGER / TO: CONSIGNEE                                                                                                                       |   |                                             |   |                                                         |               |
| NAAM/NAME: <u>ST KOERIERS</u>                                     |                        | NAAM/NAME: <u>PROTON ROAD 12</u>                                                                                                                     |   |                                             |   |                                                         |               |
| ADRES/ADDRESS: <u>TRIANGLE FARM</u>                               |                        | ADRES/ADDRESS: <u>STIKLAND</u>                                                                                                                       |   |                                             |   |                                                         |               |
| KONTAK/CONTACT: <u>021 948 1510</u>                               |                        | KONTAK/CONTACT: <u>021 948 1511</u>                                                                                                                  |   |                                             |   |                                                         |               |
| BETAAL DEUR / PAID BY: <input type="checkbox"/> AFSENDER / SENDER |                        | <input type="checkbox"/> ONTVANGER / CONSIGNEE                                                                                                       |   |                                             |   |                                                         |               |
| KBA / COD: <input type="checkbox"/>                               |                        | REKENING / ACCOUNT: <input type="checkbox"/>                                                                                                         |   |                                             |   |                                                         |               |
| AANTAL/QTY                                                        | BESKRYWING/DESCRIPTION | VOL                                                                                                                                                  | L | B                                           | H | GEWIG/MASSA                                             | BEDRAG/AMOUNT |
| 1                                                                 | 1000g                  |                                                                                                                                                      |   |                                             |   |                                                         |               |
| 2                                                                 | 1000g                  |                                                                                                                                                      |   |                                             |   |                                                         |               |
| 3                                                                 | 1000g                  |                                                                                                                                                      |   |                                             |   |                                                         |               |
| 4                                                                 | 1000g                  |                                                                                                                                                      |   |                                             |   |                                                         |               |
| VERSEKERING/INSURANCE                                             |                        | JA/YES <input type="checkbox"/>                                                                                                                      |   | NEE/NO <input type="checkbox"/>             |   | WAARDE/VALUE                                            |               |
| ADMIN                                                             |                        | BTW/VAT                                                                                                                                              |   | TOTAAL/TOTAL                                |   | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |               |
| FAKTUUR NO./INVOICE NO.                                           |                        | BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL |   | NAAM IN DRUKSKRIF/<br>NAME IN BLOCK LETTERS |   | HANDTEKENING/SIGNATURE                                  |               |
| KOERIER HANDTEKENING/<br>COURIER SIGNATURE                        |                        | DATUM/DATE                                                                                                                                           |   | AFSENDER HANDTEKENING/<br>SENDER SIGNATURE  |   | DATUM/DATE                                              |               |
| 1. WIT - KANTOOR                                                  |                        | 2. PINK - BELASTINGFAKTUUR                                                                                                                           |   | 3. BLOU - ONTVANGER                         |   | 4. GEEL - AFSENDER                                      |               |
| TYD/TIME                                                          |                        | DATUM/DATE                                                                                                                                           |   | TYD/TIME                                    |   | DATUM/DATE                                              |               |

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

**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

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1962

RUSHTAIL 55 (pty) Ltd  
Tops @ Village Square  
700 St Francis Bay  
6312

Deliver to

Tops @ Village Square  
St Francis Drive  
St Francis Bay

**TERMS: 30 Days from  
Invoice**

|         |                          |               |            |
|---------|--------------------------|---------------|------------|
| Account | Your PO Number           | Tax Reference | Sales Code |
| VILSQU  | TOPS @ VILLAGE<br>SQUARE | 4130235973    | KO&MO      |

| Code | Store | Description | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT | Total (inc Vat) |
|------|-------|-------------|----------|------------|--------------------|-------|-----|-----------------|
|------|-------|-------------|----------|------------|--------------------|-------|-----|-----------------|

|      |    |                                                          |    |        |          |  |        |          |
|------|----|----------------------------------------------------------|----|--------|----------|--|--------|----------|
| 1009 | LC | Bottega Limoncino-Limoncello 500ml<br>Order by Charlotte | 18 | 290.86 | 5,235.48 |  | 785.32 | 6,020.80 |
|------|----|----------------------------------------------------------|----|--------|----------|--|--------|----------|

Liquor Runner Cape Town cc  
is a Registered National Distributor  
REG. No: RG0004327

**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: VILSQU

|           |          |
|-----------|----------|
| Sub Total | 5,235.48 |
|-----------|----------|

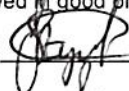
|                  |      |
|------------------|------|
| Discount @ 0.00% | 0.00 |
|------------------|------|

|                 |          |
|-----------------|----------|
| Amount Excl Tax | 5,235.48 |
|-----------------|----------|

|     |        |
|-----|--------|
| Tax | 785.32 |
|-----|--------|

|       |          |
|-------|----------|
| Total | 6,020.80 |
|-------|----------|

Received in good order

Signed  Date 15.3.24

Print name Jayson



CC 1996/011820/23 VAT/BTW 4520156276

PROTON ROAD 12 TEL: 021 948 1510 / 021 948 1511  
TRIANGLE FARM FAKS/FAX: 021 948 1754  
STIKLAND SEI/CELL: 082 823 2872

**FAKS/FAX:** 021 948 1754  
**SEL/CELL:** 082 823 2872  
079 898 6131

2748219

| VAN: AFSENDER / OFF. SENDER                                                                                                                           |                        |      |   |   |   | AAN: ONTVANGER / TO: CONSIGNEE                 |                                |                                            |                                                         |                                    |  |                                             |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------|---|---|---|------------------------------------------------|--------------------------------|--------------------------------------------|---------------------------------------------------------|------------------------------------|--|---------------------------------------------|--|
| NAAM/NAME:                                                                                                                                            |                        |      |   |   |   | NAAM/NAME:                                     |                                |                                            |                                                         |                                    |  |                                             |  |
| ADRES/ADDRESS:                                                                                                                                        |                        |      |   |   |   | ADRES/ADDRESS:                                 |                                |                                            |                                                         |                                    |  |                                             |  |
| KONTAK/CONTACT:                                                                                                                                       |                        |      |   |   |   | KONTAK/CONTACT:                                |                                |                                            |                                                         |                                    |  |                                             |  |
| BETAAL DEUR / PAID BY: AFSENDER / SENDER <input type="checkbox"/>                                                                                     |                        |      |   |   |   | ONTVANGER / CONSIGNEE <input type="checkbox"/> |                                |                                            |                                                         | KBA / COD <input type="checkbox"/> |  | REKENING / ACCOUNT <input type="checkbox"/> |  |
| AANTAL/QTY                                                                                                                                            | BESKRYWING/DESCRIPTION | VOL. | L | B | H | GEWG/MASSA                                     | BEDRAG/AMOUNT                  |                                            |                                                         |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            |                                                         |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            |                                                         |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            |                                                         |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            |                                                         |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            |                                                         |                                    |  |                                             |  |
| VERSEKERING/INSURANCE                                                                                                                                 |                        |      |   |   |   |                                                | JAYES <input type="checkbox"/> | NEE/NO <input checked="" type="checkbox"/> | WAARDE/VALUE                                            | LIABILITY INSURANCE                |  |                                             |  |
| FAKTUUR NO./INVOICE NO.                                                                                                                               |                        |      |   |   |   |                                                |                                |                                            | ADMIN                                                   |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            | BTW/VAT                                                 |                                    |  |                                             |  |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL. |                        |      |   |   |   |                                                |                                |                                            | TOTAAL/TOTAL                                            |                                    |  |                                             |  |
|                                                                                                                                                       |                        |      |   |   |   |                                                |                                |                                            | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |                                    |  |                                             |  |
| KOERIER HANDTEKENING / COURIER SIGNATURE                                                                                                              |                        |      |   |   |   |                                                |                                |                                            | NAAM IN DRUKSKRIF / NAME IN BLOCK LETTERS               |                                    |  |                                             |  |
| DATUM/DATE                                                                                                                                            |                        |      |   |   |   |                                                |                                |                                            | HANDTEKENING/SIGNATURE                                  |                                    |  |                                             |  |
| AFSENDER HANDTEKENING / SENDER SIGNATURE                                                                                                              |                        |      |   |   |   |                                                |                                |                                            | DATUM/DATE                                              |                                    |  |                                             |  |
| 1. WIT - KANTOOR    2. PINK - BELASTINGFAKTUUR    3. BLAUW - ONTVANGER    4. GEEL - AFSENDER                                                          |                        |      |   |   |   |                                                |                                |                                            | TYD/TIME                                                |                                    |  |                                             |  |
| Bank Details: Name: ST Koeriers Bank: ABQ BANK                                                                                                        |                        |      |   |   |   |                                                |                                |                                            | DATUM/DATE                                              |                                    |  |                                             |  |

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

**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****Tax Invoice**

Date 14/03/24

Page 1

Document No IT1943

Super Spar-Tops knysna  
Super Spar -Tops Knysna 46103  
Knysna Mall  
Main Road  
Knysna  
Vat# 4760143570

**TERMS: 30 Days from  
Invoice**

Deliver to

Super Spar -Tops Knysna 46103  
Knysna Mall  
Main Road  
Knysna  
Vat# 4760143570

|         |                |               |            |
|---------|----------------|---------------|------------|
| Account | Your PO Number | Tax Reference | Sales Code |
| TOPSKN  | TOPS KNYSNA    | 4760143570    | KO&MO      |

| Code | Store | Description                                           | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-------------------------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1009 | LC    | Bottega Limoncino-Limoncello 500ml<br>Order by Curtis | 6        | 290.86     | 1,745.16           |       | 261.77 | 2,006.93        |

**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

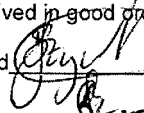
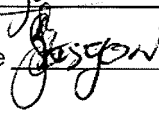
Acc No: 62096729 169

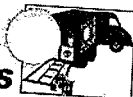
Please use your account code as your reference

for payments: TOPSKN

|                  |          |
|------------------|----------|
| Sub Total        | 1,745.16 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 1,745.16 |
| Tax              | 261.77   |
| Total            | 2,006.93 |

Received in good order

Signed  Date 15.3.24Print name 



CC 1996/011820/23 VAT/BTW 4520156276

PROTON ROAD 12  
TRIANGLE FARM  
STIKLAND

FAKS/FAX: 021 948 1754

SEL/CELL: 082 823 2872

079 898 6131

2748211

| SEL/CELL: 082 823 2872<br>079 898 6131                                                                                                               |                                                                               | VAT/BTW 4520156276                                      |                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------------|
| <b>VAN: AFSENDER / OFF SENDER</b>                                                                                                                    |                                                                               | <b>AAN: ONTVANGER / TO: CONSIGNEE</b>                   |                                                             |
| <b>NAAM/NAME:</b>                                                                                                                                    |                                                                               | <b>NAAM/NAME:</b>                                       |                                                             |
| <b>ADRES/ADDRESS:</b>                                                                                                                                |                                                                               | <b>ADRES/ADDRESS:</b>                                   |                                                             |
| <b>KONTAK/CONTACT:</b>                                                                                                                               |                                                                               | <b>KONTAK/CONTACT:</b>                                  |                                                             |
| <b>BETAAL DEUR / PAID BY:</b> AFSENDER / SENDER <input type="checkbox"/>                                                                             |                                                                               | <b>ONTVANGER / CONSIGNEE</b> <input type="checkbox"/>   |                                                             |
| AANTAL/QTY                                                                                                                                           | BESKRYWING/DESCRIPTION                                                        | VOL                                                     | L B H KBA / COD REKENING / ACCOUNT <input type="checkbox"/> |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
|                                                                                                                                                      |                                                                               |                                                         |                                                             |
| <b>VERSEKERING/INSURANCE</b>                                                                                                                         | <b>JA/YES</b> <input type="checkbox"/> <b>NEE/NO</b> <input type="checkbox"/> | <b>WAARDE/VALUE</b>                                     | <b>LIABILITY INSURANCE</b>                                  |
| <b>FAKTUUR NO./INVOICE NO.</b>                                                                                                                       |                                                                               | <b>ADMIN</b>                                            |                                                             |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL |                                                                               | <b>TOTAAL/TOTAL</b>                                     |                                                             |
|                                                                                                                                                      |                                                                               | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |                                                             |
| <b>KOERIER HANDTEKENING / COURIER SIGNATURE</b>                                                                                                      | <b>DATUM/DATE</b>                                                             | <b>AFSENDER HANDTEKENING / SENDER SIGNATURE</b>         | <b>DATUM/DATE</b>                                           |
| 1. WIT - KANTOOR    2. PINK - BELASTINGFAKTUUR    3. BLOU - ONTVANGER    4. GEEL - AFSENDER                                                          |                                                                               |                                                         |                                                             |
| Bank Details: Name: ST Koeriers Bank: ABSA BANK Account no: 400149933 Acc Type: Cheque Account Branch: Paarl Branch Code: 632005                     |                                                                               |                                                         |                                                             |

**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**

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1952

SPAR Eastern Cape  
The Spar Group Limited  
t/a SPAR Eastern Cape  
P.O.Box 11217, Algoa Park  
Port Elizabeth, 6005  
Vendor # 006359

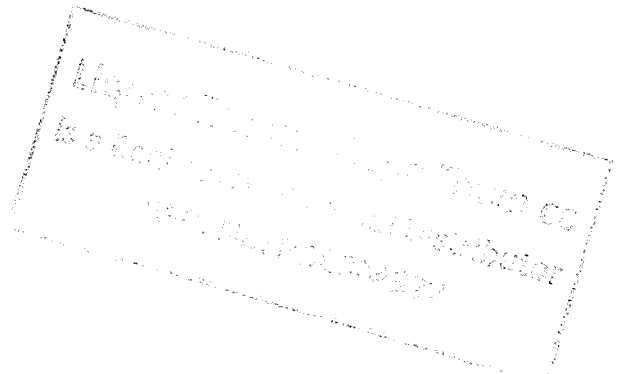
**TERMS: 30 Days from  
Invoice**

Deliver to

Newton Park Tops 46026  
C/O 3de Ave & West str  
Newton Park  
Port Elizabeth  
VAT# 4390246330

|         |                           |               |            |
|---------|---------------------------|---------------|------------|
| Account | Your PO Number            | Tax Reference | Sales Code |
| SPARE   | 46026 TOPS NEWTON<br>PARK |               | 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           |       | 261.77 | 2,006.93        |
| 1084          | LC    | Bottega Extra Dry Millesimato 750ml | 6        | 149.99     | 899.94             |       | 134.99 | 1,034.93        |
| Order by Anna |       |                                     |          |            |                    |       |        |                 |



**Payment is due strictly as per account terms.**

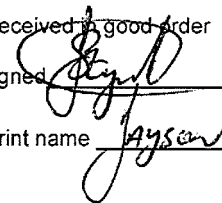
Ownership is not transferred until amount due is paid  
**Please keep this invoice to return any merchandise within 60 days.**  
Goods must be returned in a saleable condition  
**A handling fee of R75.00 will be charged on all returns.**

**BANK DETAILS: PROFUMI D'ITALIA MARKETING CC**

First National Bank : Universal Branch Code 250 655  
FNB Tableview Please use your account code as your reference  
Acc No: 62096729 169 for payments: SPARE

|                  |          |
|------------------|----------|
| Sub Total        | 2,645.10 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 2,645.10 |
| Tax              | 396.76   |
| Total            | 3,041.86 |

Received in good order

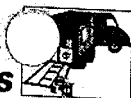
Signed  Date 15:3:24

Print name Jayson

# ST Koeriers Couriers

Fast and efficient - Vinnig en doeltreffend

CC 1996/011820/23 VAT/BTW 4520156276



## Belastingfaktuur / Tax Invoice

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

2748213

|                                                                                                                                                                                                                          |                            |                                 |                                 |                                          |   |                                                         |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------|---------------------------------|------------------------------------------|---|---------------------------------------------------------|---------------|
| VAN: AFSENDER / OFF. SENDER                                                                                                                                                                                              |                            |                                 |                                 | AAN: ONTVANGER / TO: CONSIGNEE           |   |                                                         |               |
| NAAM/NAME: <u>ST KOERIERS</u>                                                                                                                                                                                            |                            |                                 |                                 | NAAM/NAME: <u>PROTON ROAD 12</u>         |   |                                                         |               |
| ADRES/ADDRESS: <u>TRIANGLE FARM</u>                                                                                                                                                                                      |                            |                                 |                                 | ADRES/ADDRESS: <u>STIKLAND</u>           |   |                                                         |               |
| KONTAK/CONTACT: <u>021 948 1510</u>                                                                                                                                                                                      |                            |                                 |                                 | KONTAK/CONTACT: <u>021 948 1511</u>      |   |                                                         |               |
| BETAAL DEUR / PAID BY: <input type="checkbox"/> AFSENDER / SENDER <input type="checkbox"/> ONTVANGER / CONSIGNEE <input type="checkbox"/> KBA / COD <input type="checkbox"/> REKENING / ACCOUNT <input type="checkbox"/> |                            |                                 |                                 |                                          |   |                                                         |               |
| AANTAL/QTY                                                                                                                                                                                                               | BESKRYWING/DESCRIPTION     | VOL                             | L                               | B                                        | H | GEWIG/MASSA                                             | BEDRAG/AMOUNT |
| 1                                                                                                                                                                                                                        | 2. PINK - BELASTINGFAKTUUR |                                 |                                 |                                          |   |                                                         |               |
| 1                                                                                                                                                                                                                        | 3. BLOU - ONTVANGER        |                                 |                                 |                                          |   |                                                         |               |
| 1                                                                                                                                                                                                                        | 4. GEEL - AFSENDER         |                                 |                                 |                                          |   |                                                         |               |
| VERSEKERING/INSURANCE                                                                                                                                                                                                    |                            | JA/YES <input type="checkbox"/> | NEE/NO <input type="checkbox"/> | WAARDE/VALUE                             |   | LIABILITY INSURANCE                                     |               |
| FAKTUUR NO./INVOICE NO.                                                                                                                                                                                                  |                            | 17.1952                         |                                 |                                          |   | ADMIN                                                   |               |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL.                                                                    |                            |                                 |                                 |                                          |   | BTW/VAT                                                 |               |
|                                                                                                                                                                                                                          |                            |                                 |                                 |                                          |   | TOTAAL/TOTAL                                            |               |
|                                                                                                                                                                                                                          |                            |                                 |                                 |                                          |   | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |               |
| KOERIER HANDTEKENING / COURIER SIGNATURE                                                                                                                                                                                 |                            | DATUM/DATE                      |                                 | AFSENDER HANDTEKENING / SENDER SIGNATURE |   | DATUM/DATE                                              |               |
| 1. WIT - KANTOOR                                                                                                                                                                                                         |                            | 2. PINK - BELASTINGFAKTUUR      |                                 | 3. BLOU - ONTVANGER                      |   | 4. GEEL - AFSENDER                                      |               |
|                                                                                                                                                                                                                          |                            |                                 |                                 |                                          |   | TYD/TIME                                                |               |
|                                                                                                                                                                                                                          |                            |                                 |                                 |                                          |   | DATUM/DATE                                              |               |

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

**PROFUMI D'ITALIA MARKETING CC****Importers & Distributors 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 14/03/24

Page 1

Document No IT1955

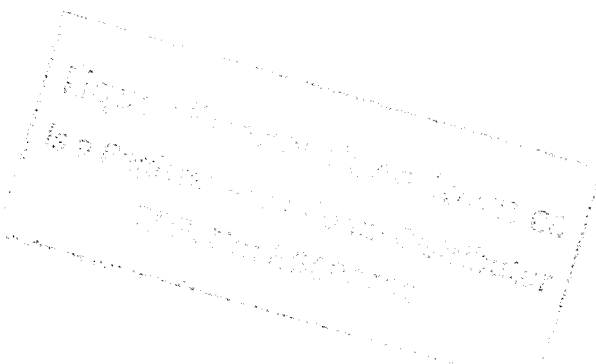
Waterfront Tops  
Waterfront Tops  
Beach Road 18  
Humevoil  
Port Elizabeth**TERMS: 30 Days from  
Invoice**

Deliver to

Waterfront Tops  
Beach Road 18  
Humevoil  
Port Elizabeth

|         |                 |               |            |
|---------|-----------------|---------------|------------|
| Account | Your PO Number  | Tax Reference | Sales Code |
| WATERF  | WATERFRONT TOPS | 4310207826    | 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           |       | 261.77 | 2,006.93        |
| 1064          | LC    | Bottega GoldProsecco -Matt Finish 200ml | 5        | 99.00      | 495.00             |       | 74.25  | 569.25          |
| 1082          | LC    | Bottega Prosecco Pronol DOC 750ml       | 6        | 219.99     | 1,319.94           |       | 197.99 | 1,517.93        |
| 1084          | LC    | Bottega Extra Dry Millesimato 750ml     | 6        | 149.99     | 899.94             |       | 134.99 | 1,034.93        |
| 2030          | LC    | Bottega Vino Dell Amore 200ml           | 4        | 88.00      | 352.00             |       | 52.80  | 404.80          |
| Order by Ruth |       |                                         |          |            |                    |       |        |                 |

**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: WATERF

|                  |          |
|------------------|----------|
| Sub Total        | 4,812.04 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 4,812.04 |
| Tax              | 721.80   |
| Total            | 5,533.84 |

Received in good order

Signed

Date

Print name

JAYSON

# ST Koeriers

Fast and efficient - Vinnig en doeltreffend

CC 1996/011820/23 VAT/BTW 4520156276



## Belastingfaktuur / Tax Invoice

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

2748216

11/19/95

|                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                          |                                                         |                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------|
| VAN: AFSENDER / OFF. SENDER                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                          | AAN: ONTVANGER / TO: CONSIGNEE                          |                    |
| NAAM/NAME: <u>ST KOERIERS</u>                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                          | NAAM/NAME: <u>PROTON ROAD 12</u>                        |                    |
| ADRES/ADDRESS: <u>TRIANGLE FARM</u>                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                          | ADRES/ADDRESS: <u>STIKLAND</u>                          |                    |
| KONTAK/CONTACT: <u>021 948 1510</u>                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                          | KONTAK/CONTACT: <u>021 948 1511</u>                     |                    |
| BETAAL DEUR / PAID BY: <u>AFSENDER / SENDER</u>                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                          | ONTVANGER / CONSIGNEE: <u>PROTON ROAD 12</u>            |                    |
| AANTAL/QTY                                                                                                                                            | BESKRYWING/DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                   | VOL                                                     | REKENING / ACCOUNT |
| 1                                                                                                                                                     | 25 kg X-MAX 100-110-120-130-140-150-160-170-180-190-200-210-220-230-240-250-260-270-280-290-300-310-320-330-340-350-360-370-380-390-400-410-420-430-440-450-460-470-480-490-500-510-520-530-540-550-560-570-580-590-600-610-620-630-640-650-660-670-680-690-700-710-720-730-740-750-760-770-780-790-800-810-820-830-840-850-860-870-880-890-900-910-920-930-940-950-960-970-980-990-1000 | 1                                                       | GEWIG/MASSA        |
| 1                                                                                                                                                     | 25 kg X-MAX 100-110-120-130-140-150-160-170-180-190-200-210-220-230-240-250-260-270-280-290-300-310-320-330-340-350-360-370-380-390-400-410-420-430-440-450-460-470-480-490-500-510-520-530-540-550-560-570-580-590-600-610-620-630-640-650-660-670-680-690-700-710-720-730-740-750-760-770-780-790-800-810-820-830-840-850-860-870-880-890-900-910-920-930-940-950-960-970-980-990-1000 | 1                                                       | BEDRAG/AMOUNT      |
| VERSEKERING/INSURANCE                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                          | LIABILITY INSURANCE                                     |                    |
| JAYES <input checked="" type="checkbox"/> NEE/NO <input type="checkbox"/>                                                                             |                                                                                                                                                                                                                                                                                                                                                                                          | WAARDE/VALUE                                            |                    |
| FAKTUUR NO./INVOICE NO.                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                          | ADMIN                                                   |                    |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL. |                                                                                                                                                                                                                                                                                                                                                                                          | BTW/VAT                                                 |                    |
| KOERIER HANDTEKENING / COURIER SIGNATURE                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                          | TOTAAL/TOTAL                                            |                    |
| DATUM/DATE                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                          | CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION |                    |
| AFSENDER HANDTEKENING / SENDER SIGNATURE                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                          | NAAM IN DRUKSKRIF / NAME IN BLOCK LETTERS               |                    |
| DATUM/DATE                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                          | HANDTEKENING/SIGNATURE                                  |                    |
| 1. WIT - KANTOOR                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                          | TYD/TIME                                                |                    |
| 2. PINK - BELASTINGFAKTUUR                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                          | DATUM/DATE                                              |                    |
| 3. BLOU - ONTVANGER                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                          |                                                         |                    |
| 4. GEEL - AFSENDER                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                          |                                                         |                    |

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

WINELANDS MEDIA TEL: 021-871 1879

**PROFUMI D'ITALIA MARKETING CC**  
**Wholesalers & 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**

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1951

Figtree Spar  
 Figtree Spar  
 Cnr William Moffet & Circular  
 Springfield  
 PE

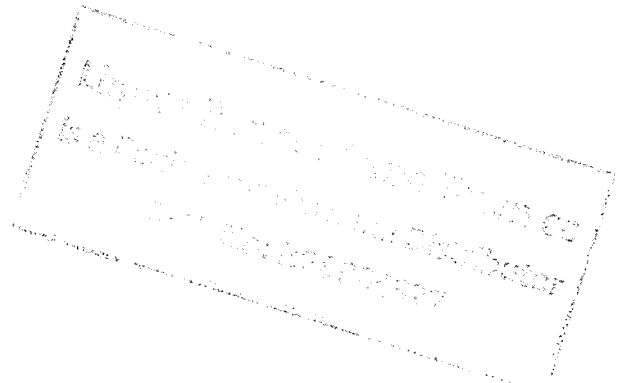
**TERMS: 7 Days from  
 Invoice EFT**

Deliver to

Figtree Spar  
 Cnr William Moffet & Circular  
 Springfield  
 PE

| Account | Your PO Number | Tax Reference | Sales Code |
|---------|----------------|---------------|------------|
| FIGTRE  | FIGTREE SPAR   | 4100259029    | MO         |

| Code                  | Store | Description                              | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT   | Total (inc Vat) |
|-----------------------|-------|------------------------------------------|----------|------------|--------------------|-------|-------|-----------------|
| 1006                  | LC    | Bottega Fior di Latte (White Choc) 500ml | 2        | 290.86     | 581.72             |       | 80.71 | 618.80          |
| 1009                  | LC    | Bottega Limoncino-Limoncello 500ml       | 2        | 290.86     | 581.72             |       | 80.71 | 618.80          |
| 1056                  | LC    | Grappa Gianduia (hazelnut choc) 500ml    | 2        | 290.86     | 581.72             |       | 80.71 | 618.80          |
| Order by Mark/Michael |       |                                          |          |            |                    |       |       |                 |



**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

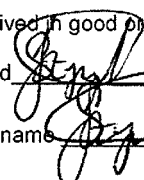
Please use your account code as your reference

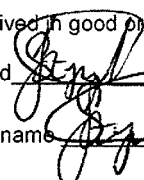
Acc No: 62096729 169

for payments: FIGTRE

|                  |                 |
|------------------|-----------------|
| Sub Total        | 1,745.16        |
| Discount @ 7.50% | 130.89          |
| Amount Excl Tax  | 1,614.27        |
| Tax              | 242.13          |
| <b>Total</b>     | <b>1,856.40</b> |

Received in good order

Signed  Date 15/3/24

Print name  Mark/Michael



Fast and efficient - Vinnig en doeltreffend

CC 1996/011820/23 VAT/BTW 4520156276

# Belastingfaktuur / Tax Invoice

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

2748212

|                                                                                                                                                      |                        |                                                |   |                                             |   |                                             |               |
|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------------------------------|---|---------------------------------------------|---|---------------------------------------------|---------------|
| VAN: AFSENDER / OFF-SENDER                                                                                                                           |                        |                                                |   | AAN: ONTVANGER / TO: CONSIGNEE              |   |                                             |               |
| NAAM/NAME: <i>ST Koeriers</i>                                                                                                                        |                        |                                                |   | NAAM/NAME: <i>PROTON ROAD 12</i>            |   |                                             |               |
| ADRES/ADDRESS: <i>TRIANGLE FARM</i>                                                                                                                  |                        |                                                |   | ADRES/ADDRESS: <i>STIKLAND</i>              |   |                                             |               |
| KONTAK/CONTACT: <i>021 948 1510</i>                                                                                                                  |                        |                                                |   | KONTAK/CONTACT: <i>021 948 1511</i>         |   |                                             |               |
| BETAAL DEUR / PAID BY: AFSENDER / SENDER <input type="checkbox"/>                                                                                    |                        | ONTVANGER / CONSIGNEE <input type="checkbox"/> |   | KBA / COD <input type="checkbox"/>          |   | REKENING / ACCOUNT <input type="checkbox"/> |               |
| AANTAL/QTY                                                                                                                                           | BESKRYWING/DESCRIPTION | VOL                                            | L | B                                           | H | GEWIG/MASSA                                 | BEDRAG/AMOUNT |
| 1                                                                                                                                                    | 10 kg. 1000 g. 1000 g. | 10                                             |   |                                             |   |                                             |               |
| 1                                                                                                                                                    | 10 kg. 1000 g. 1000 g. | 10                                             |   |                                             |   |                                             |               |
| 1                                                                                                                                                    | 10 kg. 1000 g. 1000 g. | 10                                             |   |                                             |   |                                             |               |
| VERSEKERING/INSURANCE                                                                                                                                |                        | JA/YES <input type="checkbox"/>                |   | NEE/NO <input type="checkbox"/>             |   | WAARDE/VALUE                                |               |
| FAKTUUR NO./INVOICE NO.                                                                                                                              |                        | 2748212                                        |   | ADMIN                                       |   | BTW/VAT                                     |               |
| BY SIGNING, THE CLIENT ACKNOWLEDGES HAVING READ, UNDERSTOOD, AND AGREED TO THE STANDARD CONDITIONS OF CARRIAGE AS STATED ON THE BACK OF THIS WAYBILL |                        |                                                |   | TOTAAL/TOTAL                                |   |                                             |               |
| CONFIRMATION THAT GOODS WERE RECEIVED IN GOOD CONDITION                                                                                              |                        |                                                |   | NAAM IN DRUKSKRIF/<br>NAME IN BLOCK LETTERS |   |                                             |               |
| KOERIER HANDTEKENING /<br>COURIER SIGNATURE                                                                                                          |                        |                                                |   | HANDTEKENING/SIGNATURE                      |   |                                             |               |
| DATUM/DATE                                                                                                                                           |                        | AFSENDER HANDTEKENING /<br>SENDER SIGNATURE    |   | DATUM/DATE                                  |   | TYD/TIME                                    |               |
| 1. WIT - KANTOOR                                                                                                                                     |                        | 2. PINK - BELASTINGFAKTUUR                     |   | 3. BLOU - ONTVANGER                         |   | 4. GEEL - AFSENDER                          |               |

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

**PROFUMI D'ITALIA MARKETING CC****Importers & Distributors 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 12/03/24

Page 1

Document No IT1916

Spar Western Cape Consolidated Account  
P O Box 18294  
Wynberg 7824

ATTENTION: Anthea Julie  
Email: creditors.wc@spar.co.za

**TERMS: 30 Days from  
Invoice****Deliver to**

Tops Vredeloof 35766  
Cnr De Bron Street & Boulevard  
Vredeloof  
Brackenfell, Cape Town  
VAT # 4220256392

| Account | Your PO Number           | Tax Reference | Sales Code |
|---------|--------------------------|---------------|------------|
| SPARWC  | 35766 TOPS<br>VREDEKLOOF |               | MO         |

| Code | Store | Description                                           | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-------------------------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1006 | LC    | Bottega Fior di Latte (White Choc)500ml               | 1        | 290.86     | 290.86             |       | 43.63  | 334.49          |
| 1011 | LC    | Prosecco Brut Bottega 750ml                           | 3        | 242.38     | 727.14             |       | 109.07 | 836.21          |
| 1056 | LC    | Grappa Gianduia (hazelnut choc) 500ml                 | 3        | 290.86     | 872.58             |       | 130.89 | 1,003.47        |
| 1081 | LC    | Bottega Millesimato Spumante Brut 750ml               | 3        | 159.99     | 479.97             |       | 72.00  | 551.97          |
| 1084 | LC    | Bottega Extra Dry Millesimato 750ml<br>Order by Riaan | 1        | 149.99     | 149.99             |       | 22.50  | 172.49          |

**Vredeloof Tops**

GRV No: ..... Claim No: .....

Signature: ..... Date: 18/03/24

Liquor Marketing CC  
is a Registered Importer & Distributor  
REG. No: 200512646227

**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

Please use your account code as your reference

Acc No: 62096729 169

for payments: SPARWC

|                  |          |
|------------------|----------|
| Sub Total        | 2,520.54 |
| Discount @ 0.00% | 0.00     |
| Amount Excl Tax  | 2,520.54 |
| Tax              | 378.09   |
| Total            | 2,898.63 |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**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**

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1960

Spar Western Cape Consolidated Account  
P O Box 18294  
Wynberg 7824

ATTENTION: Anthea Julie  
Email: creditors.wc@spar.co.za

**TERMS: 30 Days from  
Invoice**

Deliver to

Tops Vredeloof 35766  
Cnr De Bron Street & Boulevard  
Vredeloof  
Brackenfell, Cape Town  
VAT # 4220256392

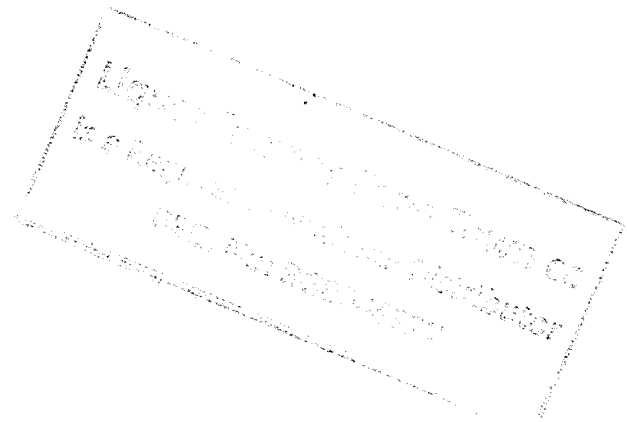
| Account | Your PO Number           | Tax Reference | Sales Code |
|---------|--------------------------|---------------|------------|
| SPARWC  | 35766 TOPS<br>VREDEKLOOF |               | MO         |

| Code | Store | Description | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT | Total (inc Vat) |
|------|-------|-------------|----------|------------|--------------------|-------|-----|-----------------|
|------|-------|-------------|----------|------------|--------------------|-------|-----|-----------------|

|      |    |                                                   |   |        |        |  |        |        |
|------|----|---------------------------------------------------|---|--------|--------|--|--------|--------|
| 2081 | LC | Bottega Prosecco Rose DOC 750ml<br>Order by Riaan | 3 | 242.38 | 727.14 |  | 109.07 | 836.21 |
|------|----|---------------------------------------------------|---|--------|--------|--|--------|--------|

**Vredeloof Tops**

GRV No: ..... Claim No: .....  
Signature: ..... Date: 14/03/24



**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 Please use your account code as your reference  
Acc No: 62096729 169 for payments: SPARWC

|                  |        |
|------------------|--------|
| Sub Total        | 727.14 |
| Discount @ 0.00% | 0.00   |
| Amount Excl Tax  | 727.14 |
| Tax              | 109.07 |
| Total            | 836.21 |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**PROFUMI D'ITALIA MARKETING CC****Importers & Distributors of Italian liquors**82 Ascot Road  
Milnerton  
7441  
Cape TownCK: 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 14/03/24

Page 1

Document No IT1938

Diamond's Discount Liquor (Pty) LTD

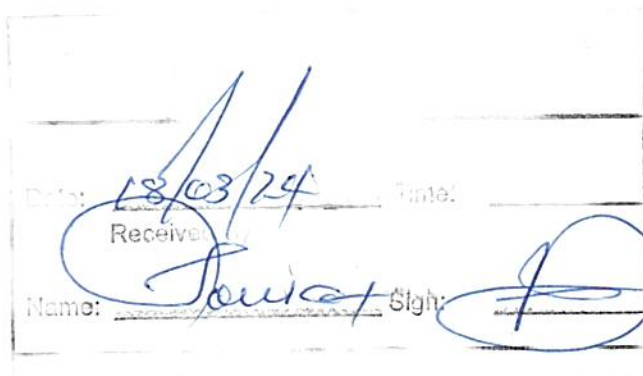
P.O.Box 1823  
Brackenfell  
Western Cape, 7561**TERMS: 30 Days from  
Invoice**

Deliver to

Diamond's Discount Liquor(PTY)  
Brackengate Office Park  
London Circle, Eskom Road  
Brackenfell, Cape Town

| Account | Your PO Number | Tax Reference | Sales Code |
|---------|----------------|---------------|------------|
| DIAMON  | 247#000006308  | 4290241308    | MO         |

| Code | Store | Description                 | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|-----------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1097 | LC    | Biostilla Organic Gin 750ml | 6        | 346.99     | 2,081.94           |       | 312.29 | 2,394.23        |

**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        | 2,081.94        |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 2,081.94        |
| Tax              | 312.29          |
| <b>Total</b>     | <b>2,394.23</b> |

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

Please use your account code as your reference

Acc No: 62096729 169

for payments: DIAMON

**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

**Tax Invoice**

Date 14/03/24

Page 1

Document No IT1983

Spar Western Cape Consolidated Account  
 P O Box 18294  
 Wynberg 7824

ATTENTION: Anthea Julie  
 Email: creditors.wc@spar.co.za

**TERMS: 30 Days from Invoice**

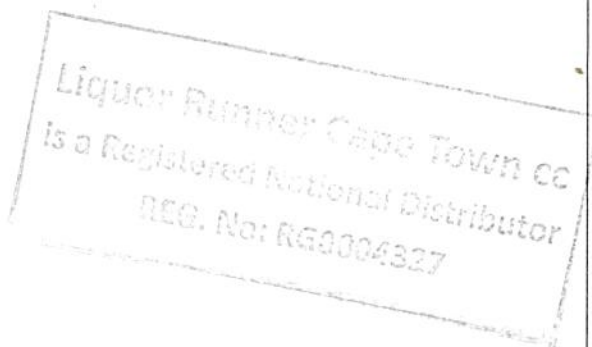
Deliver to

Spar & Tops Uitzicht 36126  
 Cnr Vatican/Sicily Strt  
 Uitzicht

VAT #490026881

| Account | Your PO Number      | Tax Reference | Sales Code |
|---------|---------------------|---------------|------------|
| SPARWC  | 36126 TOPS UITZICHT |               | MO         |

| Code | Store | Description                                                | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|------------------------------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1081 | LC    | Bottega Millesimato Spumante Brut 750ml<br>Order by Arlene | 6        | 159.99     | 935.94             | 2.50  | 140.39 | 1,076.33        |



*T. Muterh*

**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        | 935.94          |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 935.94          |
| Tax              | 140.39          |
| <b>Total</b>     | <b>1,076.33</b> |

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: SPARWC

**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

**Tax Invoice**

Date 14/03/24  
 Page 1  
 Document No IT1937

Masstores (Pty) Ltd Trading As Makro  
 Private Bag X4  
 Sunninghill  
 2157

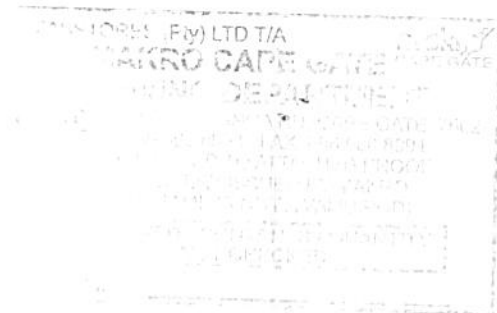
**TERMS: 90 Days from Invoice**

Deliver to

Makro Cape Gate  
 Cnr Okavango & Belani Rds  
 Brackenfell  
 Capetown

|         |                |               |            |
|---------|----------------|---------------|------------|
| Account | Your PO Number | Tax Reference | Sales Code |
| MAKRO   | 4509498675     | 4300119155    | MO         |

| Code | Store | Description                        | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT    | Total (inc Vat) |
|------|-------|------------------------------------|----------|------------|--------------------|-------|--------|-----------------|
| 1009 | LC    | Bottega Limoncino-Limoncello 500ml | 4        | 290.86     | 1,163.44           |       | 174.52 | 1,337.96        |



**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 Please use your account code as your reference  
 Acc No: 62096729 169 for payments: MAKRO

|                  |                 |
|------------------|-----------------|
| Sub Total        | 1,163.44        |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 1,163.44        |
| Tax              | 174.52          |
| <b>Total</b>     | <b>1,337.96</b> |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

[@M M M AA K K R  
[@M M M A A K K R  
[@M M M A A A K K R  
[@M M A A A K K R

PROOF OF DELIVERY

MAKRO / A Division of Massstores (Pty) Ltd.  
Reg. No. 1991/06805/07  
Vat No. 4300119155  
M19L - Cape Gate Liquor Store  
Okavango and  
Brackenfell, 7560  
Tel: 0860008993  
Fax: 0860008994  
Vendor: 8898 PROFUMI D ITALIA MARKETING  
82 ASCOT ROAD  
MILNERTON, CAPE TOWN, WESTERN CAPE, 7441  
Vendor Vat No. 4890229612  
Tel: 0215544831-02...  
Contact: Giuliana Abrahamse

[@Page: 1 of 1  
Printed On 18.03.2

[@Order Number 4509498675  
[@RGR No 5815642798  
[@Courier Name NON COURIER

Vendor Document Numbers IT1937

VENDOR

| ARTICLE | ARTICLE NO. | UOM | PACK SIZE | ORDER QTY | INVOICE QTY | DEL QTY | FINAL QTY | DIFF QTY |
|---------|-------------|-----|-----------|-----------|-------------|---------|-----------|----------|
|---------|-------------|-----|-----------|-----------|-------------|---------|-----------|----------|

185013 1009/2108 EA 1 4 4 4  
BOTTEGA LIMONCINO LIMONCELLIO 500ML

This document serves as the final proof of delivery. Remittance for this Order will be based on this Document

Receiver : GZIMRI SEUST / SIGNATURE

Validator : GZIMRI  
1 OVERSUPPLIED - TAKEN IN 7 NOT INV,  
2 DAMAGED - RETURNED 8 INVOICEI  
3 STOCK DATE EXPIRED -RETURNED 9 INVOICEI  
4 INVALID BARCODE - RETURNED 10 INCREAS  
5 NOT MAKRO SELLING UNIT-RETURN 11 DECREAS  
6 OVERSUPPLIED - RETURNED

Driver : JUNIOR JUNIOR  
ID number : 4006202G78004  
Vehicle Reg : FBK352FS



**PROFUMI D'ITALIA MARKETING CC**  
**Importers & Distributors 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 14/03/24

Page 1

Document No IT1935

Masstores (Pty) Ltd Trading As Makro  
 Private Bag X4  
 Sunninghill  
 2157

**TERMS: 90 Days from  
 Invoice**

Deliver to

Makro Ottery  
 Cnr Ottery & Old Strandfontein  
 Ottery  
 7800

| Account | Your PO Number | Tax Reference | Sales Code |
|---------|----------------|---------------|------------|
| MAKRO   | 4509498634     | 4300119155    | MO         |

| Code | Store | Description | Quantity | Unit Price | Net Value (ex Vat) | Disc% | VAT | Total (inc Vat) |
|------|-------|-------------|----------|------------|--------------------|-------|-----|-----------------|
|------|-------|-------------|----------|------------|--------------------|-------|-----|-----------------|

|      |    |                                    |   |        |        |  |        |          |
|------|----|------------------------------------|---|--------|--------|--|--------|----------|
| 1009 | LC | Bottega Limoncino-Limoncello 500ml | 3 | 290.86 | 872.58 |  | 130.89 | 1,003.47 |
|------|----|------------------------------------|---|--------|--------|--|--------|----------|

**MAKRO**  
 Private Bag X2  
 Cnr Ottery & Old Strandfontein Road  
 7800 OTTERY  
 Tel: 021 704 7435 Fax: 021 703 8473  
 PLEASE REFER TO ATTACHED  
 PROOF OF DELIVERY ISSUE  
 BY MAKRO  
 (This is not valid P.O.D.)

Liquor Distributors Cape Town cc  
 Is a Registered Retail Distributor  
 RG0002675

**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

Please use your account code as your reference

Acc No: 62096729 169

for payments: MAKRO

|                  |                 |
|------------------|-----------------|
| Sub Total        | 872.58          |
| Discount @ 0.00% | 0.00            |
| Amount Excl Tax  | 872.58          |
| Tax              | 130.89          |
| <b>Total</b>     | <b>1,003.47</b> |

Received in good order

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

19

1004 - Ottery Liquor Store  
1005 Ottery & Old Strandfontein Rd  
1006 Cape Town, 7800

1007 Tel: 0217047400  
1008 Fax: 0217036348

Vendor: 8890 PROCLUNT D ITALIA MARKETING  
82 ASCOT ROAD  
MILNERTON, CAPE TOWN, WESTERN CAPE, 7441  
Vendor Vat No: 4090229612  
Tel: 0215544831-02...  
Contact: Giuliana Abrahamse

1009 Vendor Document Numbers IT1935

Order Number 4509498634  
RGR No 5815643125  
Courier Name LIQUOR RUNNERS

Printed On 18.03.2024 at 15:07:54

DOCUMENT NUMBER: 5026441903  
SO Number:  
Triceps Number:  
Document Date: 18.03.2024  
Document Time: 13:36:28  
Page: 1 of 1

1010 VENDOR  
1011 ARTICLE  
1012 NO.

1013 UOM  
1014 PACK  
1015 SIZE

1016 ORDER  
1017 QTY

1018 INVOICE  
1019 QTY

1020 DEL  
1021 QTY

1022 FINAL  
1023 QTY

1024 DIFF  
1025 QTY  
1026 ADVISE  
1027 REASON  
1028 CODE

1029 1009/2108 EA  
1030 BOTTEGA LIMONCINO LIMONCELLO 500ML

1031 This document serves as the final proof of delivery. Remittance for this order will be based on this document.

1032 Receiver: IMNEEL

1033 DETAIL

1034 1 OVERSUPPLIED - TAKEN IN

1035 7 NOT INV, NOT ORDERED-RETURNED

1036 Validator: IMNEEL

1037 2 DAMAGED - RETURNED

1038 8 INVOICED, NOT ORDERED-RETURNED

1039 Driver: JACOBS CEDRIC

1040 3 STOCK DATE EXPIRED -RETURNED

1041 9 INVOICED - NOT DELIVERED

1042 Vehicle number: 9207255246089

1043 4 INVALID BARCODE - RETURNED

1044 10 INCREASE

1045 Vehicle Reg: DZ677FS

1046 5 NOT MAKRO-SELLING UNIT-RETURN

1047 11 DECREASE

1048 6 OVERSUPPLIED - RETURNED

CK: 200512646223  
VAT: 4890229612  
TEL: 0027 21 554 4831  
CELL: 0027 81 357 0419  
Liquor License: RG0002675

PROFUMI D'ITALIA MARKETING CC  
82 Ascot Road  
Milnerton  
7441  
Cape Town

### Transfer Document

Date 14/03/24

Page 1

Reference No. NH000520

From Store: Liquor Runners Cape Town

Liquor Runners Cape Town

Conner Range Rd & Anfield

Blackheath

Cape Town

TEL: 021 903 8874

To Store: Mark Oliver Tasting Stock Store

Mark Oliver Store

Profumi D'Italia Marketing CC

| Code | Description                        | Unit | Quantity | Unit Price | Value  |
|------|------------------------------------|------|----------|------------|--------|
| 2084 | White-Coresei Pinot Grigio 750ml   | EACH | 1        | 45.32      | 45.32  |
| 2101 | Coresei Merlot 750ml               | EACH | 1        | 57.09      | 57.09  |
| 2085 | Red- Vino Novello Breganze 750ml   | EACH | 1        | 45.30      | 45.30  |
| 1009 | Bottega Limoncino-Limoncello 500ml | EACH | 1        | 143.77     | 143.77 |

Received in good order

Signed

Date

© Sage South Africa (Pty) Ltd

4

Total

291.48

CK: 200512646223  
VAT: 4890229612  
TEL: 0027 21 554 4831  
CELL: 0027 81 357 0419  
Liquor License: RG0002675

PROFUMI D'ITALIA MARKETING CC  
82 Ascot Road  
Milnerton  
7441  
Cape Town

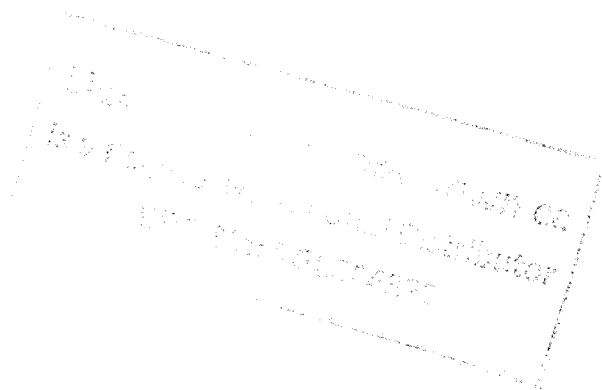
### Transfer Document

|               |          |
|---------------|----------|
| Date          | 15/03/24 |
| Page          | 1        |
| Reference No. | NH000521 |

From Store: Liquor Runners Cape Town  
Liquor Runners Cape Town  
Conner Range Rd & Anfield  
Blackheath  
Cape Town  
TEL: 021 903 8874

To Store: Mark Oliver Tasting Stock Store  
Mark Oliver Store  
Profumi D'Italia Marketing CC

| Code | Description                             | Unit | Quantity | Unit Price | Value  |
|------|-----------------------------------------|------|----------|------------|--------|
| 1056 | Grappa Gianduia (hazelnut choc) 500ml   | EACH | 1        | 147.17     | 147.17 |
| 1006 | Bottega Fior di Latte (White Choc)500ml | EACH | 1        | 136.58     | 136.58 |



Received in good order

Signed

© Sage South Africa (Pty) Ltd

Date

18/3/24

4255833

2

Total

283.75