



Tax Invoice

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The Alternative Beverage Corp (Pty) Ltd

Postal Address:

P O Box 7198

Northern Paarl

7646

Physical Address:

Unit 12 Ever Green Park

471 Sam Green Road, Green Hills

Tunney EXT 6, Germiston

2057

Telephone 1: 0861 744 447

Liquor License: RG 000265

Facsimile: 021 870 1139

VAT No: 4520133960

Delivery Day: Farm Direct

Alternative Beverage Corporation

To: PNP KZN DC (MA08)

Delivery Address:

Cnr 80 Goodwood & Mahogany Roads

Westmead

Pinetown

Kwazulu Natal

3610

Pick n Pay Retailers (Pty) Ltd

VAT No: 4090105588

Postal Address:

P.O Box 23087

Claremont

7735

Account PNP455

Date 10/12/2024

Warehouse 020

External Order 4746905575

Our Reference INV56338

Code	Item Description	WHS	Warehouse Name	QTY	Unit	Price (Ex)	Price (In)	Disc %	Total Excl	Tax	Total (Incl)
CJ OR	Cactus Jack Original Sours	020	Liquor Runners DBN	23.00	Case06.750	732.78	842.72	0.0 %	16 854.40	2 528.16	19 382.56

BOOKING SLOT

Date: 13/12 FRI

Time: 10:00am

Liquor Runners DBN
DEBRIEN

Signed: _____

Received by: _____

Date: _____

Signed: _____

BANK DETAILS

Bank Name: First National Bank

Bank Account: 62553290869

Branch Code: 210243

Kindly use your Account Number as Reference
when processing payments. Thank you.

Total (Excl) 16 854.40

Tax 2 528.16

Total (Incl) 19 382.56

Discount 0.00

Total (Incl) 19 382.56



Inspired by you

Goods Receipt / AOD

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Date Printed: 13.12.2024 11:29:08

Date Posted: 13.12.2024 11:28:06

From: The Alternative Beverages Corporation
PO Box 16714
GERMISTON
1612
Tel: +27118224080
Fax: 0118226300

To: KZN DC Perishables
PO Box 154
PINE TOWN
3620
Tel: 0317006000
Fax: 0317006200

Vendor Number: 1000005075
EWM Delivery Number: 13071896
Goods Receipt Number: 1800244399
Purchase Order Number: 4746905575
Vendor Invoice Number: INV56338

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

Article Number	Description	Barcode	UoM	Received Qty	Pack Size	Mixed Lug
265489	CACTUS JACK TEQUILA ORIGINAL SOUR 750ML	6005238002745	CK	23	6	

Total Qty Received 23

Received by:

Checked By Senior Receiving Manager:

Driver's Name:

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

Vehicle Registration:

TMUNIAN101 (THEOLAN MUNIAN)

Name (print)

Signature

Name (print)

Signature