DGB (Proprietary) Limited
(Reg. No. 1946/021311/07)
www.dgb.co.za

DGB (PTY) LTD MIDRAND [1]
P/BAG X212, MIDRAND, 1685
724 16TH ROAD, MIDRAND, 1685
PHONE: 011 653-1000
FAX: 011 507-5383
DGB - NLA REGISTRATION CERTIFICATE Ref 16783

DELIVER TO
TOPS@ SPRAGS #46002 EC
BONZA BAY ROAD
MAJOR SQUARE
BEACON BAY 0000 SOUTH AFRICA

CURRENCY ZAR

INVOICE TO
SPAR EASTERN CAPE DROPSHIPMENT
PO BOX 11217
ALGOA PARK
0000
SOUTH AFRICA
VAT NO. 4820102095/ NLA-ECP00436/03026/OF

COPY TAX INVOICE

VAT REG. No. 4490105063

Order Date	Our Ref. No.	Your Ref. No.	Account No.	Terms	Territory	Invoice Date	Invoice Number
24.06.2024	102291911 ~~8012437268~~	16837	16837	ZZ20	EA9000	25.06.2024	702402072
						Delivery Date 25.06.2024	PAGE 1 of 1

Product Code	Description	Units Per Case	Cases	✔	Units	✔	Price	Discount	Net Price	Total Value Excl. VAT	VAT	Total Value Incl. VAT
DGB (Pty) Ltd												
100677	KANONKOP KADETTE CAPE BLEND 750ML	6x750ml	20		0		586.14	11.92-	584.22	11,684.34	1,752.65	13,436.99

Litres Spirits	Litres Fort Wine	Litres Unf. Wine	Litres Whiskey	Litres Other	Total Litres	Total Cases	Total Units	Total Weight (Kg)	Total Volume (m³)	Total Value Excl. VAT	Total VAT	Total Value Incl. VAT
0.00	0.00	90.00	0.00	0.00	90.00	20.000	0.000	172.000	0.280	11,684.34	1,752.65	13,436.99

Goods Received by Customer – Print Name	Goods Received by Customer – Signature	Date

If paid **COD**, a 2% discount is deductable from the total invoice amount.
PLEASE USE YOUR ACCOUNT NUMBER 16837 AS A REFERENCE
WHEN PAYING VIA EFT
Customers with terms only: If paid 15 days from statement, a 1.5% discount is deductible

Alt Tel: ORDERS (0860 342-100) E-mail Accounts: dgbdebtors@dgb.co.za
The calling bay is open: Mon - Thurs: 08h00 to 16h15 and Friday: (08h00 to 14h45)
Plant: 2290 Rep Code: 41291

PRO FORMA RETURNS NOTE

SPARGS BEACON BAY
TOPS A/C 46002
Goods Received By: XOLANI
Signature:
Time: 11:00 26/06/24
G.R.V No: 255/5 Claim Nr:

EMPTY RETURNS					OTHER RETURNS						
CODE	DESCRIPTION ITEM	QTY	VALUE	CODE	ORIG. INV. NO.	DESCRIPTION	PACK	CASES	UNITS	VALUE	REMARKS

EMPTIES / RETURNS RECEIVED:

DRIVER'S SIGNATURE: _____ CUSTOMER'S SIGNATURE: _____