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 @ Vincent #46039 Ec
CNR BELL STR & WESTERN AVE
VINCENT
EAST LONDON 5200 SOUTH AFRICA

CURRENCY ZAR

INVOICE TO
SPAR EASTERN CAPE DROPSHIPMENT
PO BOX 11217
ALGOA PARK
0000
SOUTH AFRICA
VAT NO. / NLA-ECP11533/03026/OF

COPY TAX INVOICE

VAT REG. No. 4490105063

Order Date	Our Ref. No.	Your Ref. No.	Account No.	Terms	Territory	Invoice Date	Invoice Number
03.07.2024	102296091 8012443346	YOLIE	10458	ZZ30	EA9000	09.07.2024	702408060
						Delivery Date	10.07.2024

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
Bacardi S.A												
103767	BREEZER PEACH 440ML CANS	24x440ml	1		0		443.45	0.00	443.45	443.45	66.52	509.97
103766	BREEZER WATERMELON 440ML CANS	24x440ml	2		0		443.45	0.00	443.45	886.90	133.03	1 019.93

VINCENT GOODS RECEIVED
tops!
BY: John NAME SIGN
GRV NO: 63399
DATE: 10/07/24 TIME: 12:00

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	0.00	0.00	31.68	31.68	3.000	0.000	35.180	0.051	1,330.35	199.55	1,529.90

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 10458 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

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: _____