



Alternative Beverage Corporation

Tax Invoice

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

Page 1 of 1

Pick n Pay Retailers (Pty) Ltd

VAT No: 4090105588

Postal Address:

P.O Box 23087

Claremont

7735

To: PNP KZN DC (MA08)

Delivery Address:

Cnr 80 Goodwood & Mahogany Roads

Westmead

Pinetown

Kwazulu Natal

3610

Account PNP455

Date 25/06/2024

Warehouse 020

External Order 4740031781

Our Reference INV52189

Code	Item Description	WHS	Warehouse Name	QTY	Unit	Price (Ex)	Price (In)	Disc %	Total Excl	Tax	Total (Incl)
LV CA	Lovoka Caramel	020	Liquor Runners KZN	5.00	Case06.750	1 090.80	1 254.42	10.0 %	4 908.60	736.29	5 644.89
CJ OR	Cactus Jack Original Sours	020	Liquor Runners KZN	23.00	Case06.750	732.78	842.72	0.0 %	16 854.40	2 528.16	19 382.56

BOOKING SLOT

Date: 28/06 FRI

Time: 10:00am

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) 21 763.00

Tax 3 264.45

Total (Incl) 25 027.45

Discount 0.00

Total (Incl) 25 027.45

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: 12155181
Goods Receipt Number: 187889388
Purchase Order Number: 4740031781
Vendor Invoice Number: INV52189

Company Reg No: 1973/004739/07

VAT Reg Number: 4090105588

Article Number	Description	Barcode	UoM	Received Qty	Pack Size	Mixed Lug
485056	LOVOKA VODKA CARAMEL 750ML	6005238002660	CS	5	6	
265489	CACTUS JACK TEQUILA ORIGINAL SOUR 750ML	6005238002745	CK	23	6	

Total Qty Received 28

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