



Tax Invoice

Page 1 of 1

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
Turney 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:

80 Goodwood Mahogany Road
Westmead
Kwazulu Natal
3600

Pick n Pay Retailers (Pty) Ltd

VAT No: 4090105588

Postal Address:

P.O Box 23087
Claremont
7735

Account PNP455

Date 02/10/2023

Warehouse 020

External Order 4729402838

Our Reference INV46465

Code Item Description

CJ OR Cactus Jack Original Sours

BOOKING SLOT

Date: 06/10 FRI

Time: 09:30am

WHS Warehouse Name

020 Liquor Runners KZN

QTY Unit

23.00 Case06,750

Price (Ex)

732.78

Price (In)

842.72

Disc %

0.0 %

Total Excl

16 854.40

Tax

2 528.16

Total (Incl)

19 382.56

Liquor Runners Durban

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

Page : 1 of 1

Date Printed: 06.10.2023 07:55:3

Date Posted: 06.10.2023 07:52:1

From: The Alternative Beverages Corporation
PO Box 16714
GERMISTON
1612
Tel: 0118224080
Fax: 011 8226 300

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

Vendor Number: 1000005075
EWM Delivery Number: 10931341
Goods Receipt Number: 187481811
Purchase Order Number: 4729402838
Vendor Invoice Number: INV46465

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:

NNGCONGO597 (NKOSIKHONA NGCONGO)

Name (print)

Signature

Name (print)

Signature

[Signature]

Bongani

[Signature]