

**Novartis Pharma AG****INVOICE****Invoice :** ##0018401ZX**Date:** 10 Jan-2020**TO:****Recipient Name :****Company Name :** Mama Lisa Workshop Restaurant

(Pty) Ltd

[Street Address]

[City, ST ZIP Code]

Phone: 0800 744 8788

P.O. NUMBER	VAT NUMBER	TAX NUMBER
#@_95077	#VRN_ 000099491	## -0000035765

QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
467	Asian Fusion Catering	R 678.12	R 2352.05

SUBTOTAL	R 4792779.77
TOTAL DUE	R 272585

Make all checks payable to [Novartis Pharma AG](#)