# Invoice # 001656

**Date:** 2026-10-06
**Payment:** CARD




Customer Name
Dad

Customer Email
—

Customer Phone
—

Notes
Payment: CARD

| Item | Size | Qty | Unit (inc) | Line Total |
|---|---|---|---|---|
| Peak Caps | One Size | 1 | 170.00 | 170.00 |
| | | | **Total (inc)** | **170.00** |

**NOTE: All Goods Returned Must be returned In Original Packaging.**

**Banking Detail**
AXOLOTL SCHOOLWEAR | FNB | ACC No: 63180770620 | Branch: 250655
**Please Use Invoice Number As Reference**