

PURCHASE ORDER

SUPPLIER: Neximed

NO. : 1910

ADDRESS: _____

DATE: 10-3-28

REQUESTED BY: Pampana chrizul/stock


TERMS: 60-120 days

[illegible]

Note : CPR UPON DELIVERY. NO CPR, NO DELIVERY.

Prepared by: Lizette Ann D. Santos

Checked by :

Approved by: 
Inocenta B. Manigos

for questions and verifications regarding this purchase, you may contact 0926-751-1770, 0917-555-0172.
do not accept purchase form if no signature and watermark logo of BOON.

NEXTMED PHARMA, INC.

Unit A-46 Samar Avenue, Brgy. South Triangle, Quezon City 09:15:50

cheChe

QUOTATION FORM

Nº 11680⁰¹¹⁶⁸⁰

BOON PHARMA CORP - C01057 -			PSR No.	D.R. NO.:	Date	
BLDG 1424 ANACLETO ST, ZONE 3 BRGY 334 METRO MANILA 12750.00			P-032 BELLE-MG/BAMBANG DEPOT	011680	10/06/2025	
			TERMS: Days			
PCode	QTY	PARTICULAR/S	LOT NO.	Expiry Date	Unit Price	Total Amount
P2101	150	SALBUTAMOL+GG SOLVOMIX 2MG/100MG 100'S	2409139	9/2027	85.00	12,750.00
<p>P-O-C 10-07-05</p> <p>ENCODER DATE: 10/8/25 BY: [Signature]</p> <p>RECEIVED 08 OCT 2025</p>						
WE ONLY ACCEPT RETURN ITEM WITHIN 30 DAYS FROM DATE OF PURCHASE.			STORE AT TEMPERATURE NOT EXCEEDING 30°C		Total Items : 1	
Prepared By:		Checked By:	Received By: [Signature]		Gross Amount 12,750.00	
<input checked="" type="checkbox"/> Box/es		<input type="checkbox"/> Bag/s			Net Discount	
					Net Amount	