



AIRLIFE INTERNATIONAL TRADING CORP.

#9 Indigo Street, Stela Maris Subd, Brgy. Maybunga Pasig City, Philippines 1607
8628-1967 • 8642-7073 • 7007-1584 • 0917-114-5094 • 0917-112-3907
sales@airlife.com.ph www.airlife.com.ph

DELIVERY RECEIPT

05019

SOLD TO MESSRS.	BOON PHARMA CORP.	DATE	08-Oct-25	TERMS	80
ADDRESS	1424, ANACLETO ST, BARANGAY 334, 1014 SANTA CRUZ NCR, MANILA	SALESMAN	DEEPAK	P.O. NO.	1463

PRODUCT	MODEL	EXPIRY DATE	QUANTITY	UNIT PRICE	AMOUNT
MAXCARE COMPRESSOR NEBULIZER	NEB-09	01-Dec-27	48	550.00	26,400.00

P-O-C
10-08-25



RECEIVED 09 OCT 2025

PREPARED BY:	CHECKED BY:	DELIVERED BY:	INVOICE NO.: 15737	TOTAL	26,400.00
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THE BUYER HEREBY AGREES AND GUARANTEES TO PAY THE VALUE OF THE GOODS COVERED BY THIS INVOICE UPON RECEIPT OF MERCHANDISE UNLESS OTHERWISE STIPULATED. THE BUYER ALSO AGREES THAT THE GOODS MENTIONED ABOVE ARE THE PROPERTY OF AIRLIFE INTERNATIONAL TRADING CORP. UNTIL COMPLETELY PAID FOR. BUYER FURTHER AGREES THAT IN THE EVENT OF FAILURE TO PAY THE AMOUNT OF THIS INVOICE WHEN IT FALLS DUE IN ACCORDANCE WITH THE TERMS OF PAYMENT ABOVE SET FORTH SAID AMOUNT OR ANY BALANCE THAT MAY REMAIN THEREON SHALL EARN INTEREST AT THE RATE OF 24% PER ANNUM IN THE EVENT OF ANY DEFAULT AND THIS INVOICE IS TURNED OVER TO AN ATTORNEY FOR COLLECTIONS. BUYER LIKewise OBLIGATES HIMSELF TO PAY AS ATTORNEY'S FEES AN AMOUNT EQUIVALENT OF 25% OF THE AMOUNT DUE HEREUNDER. IN CASE OF SEVERAL BUYERS OF OBLIGATION HEREIN CONTRACTED SHALL BE UNDERSTOOD AS JOINT AND SEVERAL. ALL ACTIONS UNDER THIS INVOICE SHOULD BE BROUGHT BEFORE THE COURTS OF CEBU. GOODS TRAVEL AT BUYER'S RISK.

RECEIVED the quantity and merchandise above-mentioned in good order, condition and to my/our full and complete satisfaction. I/WE agree to the conditions stipulated herein.

Customer / Authorized Representative (Name & Signature)



PURCHASE ORDER

SUPPLIER : Air-life

NO. : 1916

ADDRESS : _____

DATE : 10-6-25

REQUESTED BY : Boon Pharma Pampanga - stocks

TERMS : 90 days

DESCRIPTION	UNIT/ PACK	QTY	PRICE	AMOUNT
Mini compressor Nebulizer (Maxcare)	bxs	50 48	550	27,500 26,400
				26,400
			TOTAL	27,500

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

Prepared by : Lizette Ann D. Santos

Checked by : _____

Approved by : Inocencia 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.