

Warehouse

4 SEP DR

243709

# PRIMECARE

## PHARMACEUTICAL DISTRIBUTORS

M.H. Del Pilar St., Santo Nino Public Market, Hagonoy, Bulacan  
Tel. No.: (044)768-1937 Cel. No.: GLOBE (0906)521-4600 SUN (0923)330-3243  
TIN 218-852-428-000

## SALES ORDER FORM

No 243709

TRA  
EUNICE

Customer No.:

Pampanga

P. O. No.

Delivered to:

BOON PHARMA CORP.

Delivery Date:

10/24/2025

Due Date:

10/24/2025

Buss. Style:

TIN:

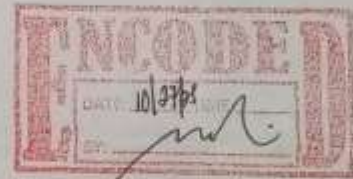
Address:

BUILDING 1424 ANACLETO ST., ZONE 33, STA. CRUZ, BRGY. 334  
MANILA CITY, METRO MANILA

Terms of Payment:

30 days

QTY	UNIT	PRODUCT CODE	DESCRIPTION	LOT/BATCH NO.	EXPIRY DATE	UNIT PRICE	AMOUNT
100	100-S(300CS)		AMBLOSYL AMLODIPINE 5MG TAB L200	EF0140	05/20	12.00	2,500.00
100	100-S(100CS)		PRESARTAN 50 LOSARTAN POTASSIUM 50MG TAB L60	HFY0825	12/27	43.00	25,800.00



RECEIVED 27 OCT 2025

PO-C  
10-25-25

7 BOX

WE ONLY ACCEPT RETURNS WITHIN 30 DAYS FROM DATE OF PURCHASE

BOX ☐

PLASTIC ☐

6 CS 1 box loose

Prepared by:

Packed by:

Checked by:

Delivered by:

Date:

Received the above goods in good order and condition

TOTAL

Richard

Ventura

10/24/25

CARL LUNA

35,300.00

CONDITION: Our responsibility covers upon delivery of merchandise in whole or public center. No claims for losses in transit due to leakage, breakage or other cause in warehouse or in transit. It is hereby stipulated between parties that any removal of 50% per annum will be charged on all merchandise. The customer agrees to pay an additional 5% surcharge on all merchandise. All in all, the customer shall be responsible for all losses of stock when the account is given to the company for collection.