



RETA drug

04:45:29 PM Boxs: _____
 JESUS RYAN A. ACUZA Prop.
 VAT Reg. TIN: 201-222-824-00000

0000019581

DELIVERY RECEIPT

Nº 222284

11.12.25

45 Plaridel St. Quirino 3709, Solano Nueva Vizcaya Philippines
 Telefax: (078) 8326-7836 *** Cell phone No.: 0917-807-2305 *** E-mail: retadrug@yahoo.com

RELEASED BY:

DELIVERED BY: BOON PHARMA CORP. (9425000001)		TIN/SC TIN:	DELIVERY DATE: 10/30/2025	DUE DATE: 11/14/2025	
ADDRESS: BLDG. 1424, ANACLETO ST. STA. CRUZ, BRGY.			REPRESENTATIVE: Klarisse Joy Palaña-B	TERMS: 15 Days	
EXPIRY DATE	LOT NUMBER	DESCRIPTION	QUANTITY	UNIT PRICE	NET AMOUNT
09-2028	2998JN	Mefenamic Acid (Myrefen) 500mg Caps. 100's	300	75.00	22,500.00
09-2028	2188JN	Mefenamic Acid (Myrefen) 500mg Caps. 100's	200	75.00	15,000.00
09-2027	24PZ324	Metoprolamide HCl (Plazimide)	300	40.00	12,000.00
06-2027	CFX1002	Reta Cefixime 100mg/5mL PFS 60mL (Medisure)	288	65.00	18,720.00
03-2028	2521812	Reta Salbutamol 100mcg/dose (200 doses) Metered	300	67.00	20,100.00
06-2028	XT5G001	Ursodeoxycholic Acid (Trisodex) 300mg FC Tablet 100's	50	1,300.00	65,000.00
Total Items: 6		Waybill No.:			
PREPARED BY: Klarisse Palaña		APPROVED BY:	DELIVERED BY: Klarisse Palaña	TOTAL:	
TERMS AND CONDITIONS: All checks must be payable to the order of RETA DRUG. Always request for receipt upon payment. All transactions shall be payable within 30 days from the date of delivery. Interest at 2% monthly shall be charged on all overdue accounts. We are not responsible for any loss or damage due to leakage or other causes after delivery of shipments by us in good order and condition. The parties submit themselves to the exclusive jurisdiction of the courts of Solano, Nueva Vizcaya in any legal action arising out of this transaction. In case of litigation, the customer shall be liable to pay 20% of the judgment amount as attorney's fees and cost of collection as well as the payment of court docket fees.		RECEIVED ARTICLES IN GOOD ORDER AND CONDITION		Discount 0.00 % 0.00	
Cardholder's Name: _____ Date: 11/6		VAT Exempt _____ Less: SC/PWB _____		VAT 12% 0.00 % 0.00	
Signature: <i>[Signature]</i>		VAT Zero _____ Total Sales _____		Total Amount Due 153,320.00	
Business Stamp: _____		(VAT inclusive)			



POC 11/6/25

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