79-1019 HAUKAPILA ST

41109 DELIVERY INSTRUCTIONS: GROCERIES 70 KEALAKEKUA

SOLD TO

KONA COMMUNITY HOSPITAL

KEALAKEKUA

HI 96750-0000

79-1019 HAUKAPILA STREET

PULANI, A/P DEPT.

Guam Address: Guam Phone: Guam Fax:

P O. Box 21089 GMF, Guam 96921 (671) 649-9312 (671) 649-3346

Toll Free Phone:

1 (800) 272-5268

ATTN:

Street Address:
Honolulu Phone:
Customer Service Fex:
Accounts Receivable Fax:
Export Department Fax: Mailing Address:

F 0 0

ERVICE

(808) 843-3200 (808) 843-3211 x: (808) 843-3201 (808) 843-3223 716 Uml Street, Honolulu, HI 96808

<u>↓</u> LOCATION CUSTOMER NO. INVOICE NO. 13490 1818817

HFM FOODSERVICE P.O. BOX 855 HONOLULU, HAWAII 96808

MAIL CHECK IO:

PAGE 1 12/04/2018 DATE

SELLING TERMS

DISCOUNT TERMS INAPPLICABLE IF ACCOUNT IS PAST DUE

FREIGHT TERMS

NET 30

ROUTE: MONDAY KONA

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IF NOT PAID ACCORDING TO TERMS, A LATE CHARGE OF 1-1/2% PER MONTH (18% PER ANNUM) WILL BE CHARGED, IF THE MATTER IS REFERRED FOR COLLECTION, CUSTOMER AGREES TO PAY ALL COLLECTION COSTS, INCLUDING ATTORNEYS, FEES, WHETHER OR NOT SUIT OR ACTION IS FILED.

HEREBY ACKNOWLEDGE

7/17/1X CUSTOMER COPY

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THE THE STREET STREET, STREET 79-1019 HAUKAPILA ST

DELIVERY INSTRUCTIONS: GROCERIES 70 KEALAKEKUA

41109

SOLD TO

KONA COMMUNITY HOSPITAL

KEALAKEKUA

HI 96750-0000

79-1019 HAUKAPILA STREET

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716 Umi Street, Honolulu, HI 96819 P.O. Box 855, Honokulu, HI 96808

4

HFM FOODSERVICE P.O. BOX 855 HONOLULU, HAWAII 96808 MAIL CHECK TO:

PLEASE RETURN INVOICE COPY WITH YOUR PAYMENT

LOCATION CUSTOMER NO. INVOICE NO. 13490 1818817

PAGE

N 12/04/2018 DATE

SELLING TERMS

DISCOUNT TERMS INAPPLICABLE IF ACCOUNT IS PAST DUE

FREIGHT TERMS

NET 30

ROUTE: MONDAY KONA

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% \$

Otherwise Pay Invoice Total

69

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Discount Available

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79-1019 HAUKAPILA ST

DELIVERY INSTRUCTIONS: GROCERIES KEALAKEKUA

41109 SOLD TO 70

KEALAKEKUA 79-1019 HAUKAPILA STREET ATTN: PULANI, A/P DEPT. KONA COMMUNITY HOSPITAL HI 96750-0000

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14 LOCATION CUSTOMER NO. INVOICE NO. 13490 1818817

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PAGE 3 12/04/2018

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ROUTE: MONDAY KONA

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