



May 09, 2025 00:00

Invoice (Facture)

INV-YDE-FO00231-2025



Bill To:

Customer ID: CUST-YDE-0194

Customer Name: FOND REGIONAL POUR LA SANTE DU CENTRE

Address: MESSA CAMP SCIS

Tel: (67) 893-8798

Global Distributors Global Distributors of Pharmaceutical Products
Carrefour Diderot, Carrefour Diderot, Ahala, BP 7761 Yaounde, Cameroon

Email: info@gcpharma.org

Tel: 222 316 754

No	Product ID	Generic Name	Brand Name	Batch Number	Qty	U Price	Total
1	PROD-0017	Artemether 80mg + lumefantrine 480mg	Artegam	ETN5B13	2,000	450.00 CFA	900,000.00 CFA

Payment Schedule:

When	Amount	Date
6 Weeks	1,000,000.00	Jun 10, 2025

Totals:

Total(THT): 900,000.00 CFA

IR Tax (0%): 0.00 CFA

Pre Compte (0%): 0.00 CFA

TVA (0%): 0.00 CFA

Payment Terms: Credit

Payment Mode: Bank Deposit

Total(TTC): 900,000.00 CFA

Branch	Bank Name	Account Number	RIB
	NFC	10025000221720108179-994	

Amount paid in words / Montant payé en mots: Nine hundred thousand frs

NIU: M022014416253M | Reg No: RC/PA/2020/B/239