

EMPLOYEE'S BENEFIT REIMBURSEMENT FORM

Panamed

| | | | |
|---|-----------------|-----------|----------|
| EMP. NO. | EMPLOYEE'S NAME | DATE | 11/23/20 |
| POSITION/DESIGNATION: | | HARRIS CH | |
| DIVISION / DEPARTMENT: | | HARD | |
| NATURE OF BENEFIT: <input type="checkbox"/> DENTAL <input type="checkbox"/> OPTICAL <input checked="" type="checkbox"/> MEDICINE | | | |

| AMOUNT | PARTICULAR/DESCRIPTION |
|-----------------|---|
| 580.00 | *SOUTHSTAR DRUG 11/23/20 SI: 000009191 11/23/20 |
| 1,330.00 | *MERCURY DRUG 11/23/20 SI: 101652750574 11/23/20 |
| 773.50 | *WATSON 11/22/20 SI: 5965704800 11/22/20 |
| 944.00 | *MERCURY DRUG 11/21/20 OR#: 110611325134 11/21/20 |
| 500.00 | *SARDED HART & JAMES Pharmacy: 16634 Mercury Drug |
| 3,167.50 | TOTAL AMOUNT |

3,167.50
 580.00
 1,330.00
 773.50
 944.00
 500.00

Southstar Drug
 121 DUKING STREET, AVE. CAGAYAN
 CAGAYAN, ILOILO CITY 6100
 TEL: 0905-2222222 FAX: 0905-2222222

NAME: _____
 ADDRESS: _____
 TO: _____
 SIGNATURE: _____

CENTRAL AVANCE TAB 0000000012817
 2 X P290.00/Unit
 580.00 V

TOTAL P500.00
 CASH P1,000.00
 Change P420.00

Variable 517.00
 VAT Exempt Sales 0.00
 Zero Rated Sales 0.00
 VAT 62.14
 Total 500.00

 Total (Amount) 2
 Cashier: 8761 Cabanatuan, Manila 10
 Tel: 0438-04262020 Time: 10:26:36
 Terminal No: 0002
 Trans ID: 9627

This covers all your sales Invoice
 SI No: 0000009191

 Exchange of item for reasons other than those provided under the Consumer Act will only be allowed within 7 days from date of purchase.
 Please present your tape receipt.

 Panamed's Supermarket Corporation
 1101, Robinsons Pl. Ave., Bannanway St.
 CAGAYAN, ILOILO CITY 6100
 Tel: 0905-2222222 FAX: 0905-2222222

Mercury Drug - CAGAYAN BRANCH
 CAGAYAN BRANCH
 1101 Robinsons Pl. Ave. Bannanway St.
 CAGAYAN, ILOILO CITY 6100
 TEL: 0905-2222222 FAX: 0905-2222222

ENERVON TAB 101 65.00
 480778805315 10 @ 6.50
 BENECOL C400mg 652.50
 480652927001
 VALPROX 78500mg 127.50
 4807788053201 5 @ 25.50
 480778805485 5 @ 36.50
 480778805485 23.75
 480650575719 5 @ 4.76
 480650575719 278.75
 480034811332 5 @ 55.75

TOTAL 1330.00
 AMOUNT TENDERED 1500.00
 CASH 1500.00
 TOTAL PAYMENT 1500.00
 CHANGE 170.00

 ORDER #00765
 SOLD TO
 ADDRESS
 TIN
 BUSINESS STYLE

 VARIABLE (C) 1187.50
 VAT Exempt Sale (X) 0.00
 VAT Zero Rated Sales (Z) 0.00
 VAT 142.50
 Amount Due 1330.00

Received Merchandise in Good Condition
 at Mercury Drug Makabansang Branch
 Makabansang Branch
 433 Lt. Alifan St. Brgy. Loran de Jesus, San Jose, Manila
 VAT REG TIN: 000-000000
 Acc'd No: 042-00013621-000336-18104
 Validity Date: 06/31/2008 - 07/31/2025
 PII No: 11062017-110-0000000001

THIS INVOICE/RECEIPT SHALL BE VALID FOR FIVE (5) YEARS FROM THE DATE OF THE PERMIT TO USE

 0905-2222222
 0905-2222222

SACRED HEART OF JESUS PHARMACY

No. 16634 Date: 03-14-20

Terms: _____

SC/PWD ID No. _____
SC/PWD Signature: _____

| | |
|------------|-------|
| Unit Price | 11.50 |
| Amount | 11.50 |

| | |
|----|----|
| 37 | 38 |
| 39 | 40 |

| | |
|----|----|
| 37 | 38 |
|----|----|

DATE: 10/10/1968

| | | |
|--|----------|-------|
| | VAT (0%) | 18.75 |
| | Net VAT | 18.75 |
| | Total | 18.75 |

| | | |
|--|--------------------|-------------|
| | Account Net of VAT | 85:50 |
| | | and Payment |

| | | |
|--------------|--|--|
| AND Discount | | |
| Amount Due | | |

| | |
|---|--|
| 2 | |
| | |

| | |
|---|---|
| <div style="text-align: right;">  </div> | <div style="text-align: right;"> Total Amount Due </div> |
|---|---|

the jurisdiction of the Court of Pasig City
an amount will be charged to all overdue
delinquent (to be paid in 30 days)

CONFIDENTIAL

Authorized Representative

Production No 43BMF2015000000002 12/20/13

AS FROM THE DATE OF THE ATFP

Watsons

DEPT. BY: LAM YU MATH & QUALITY TEAM
G.F. 602-A & 2F 226 228 WUHOON MARKET
PLACE ORIGINAS BR SAN LITUNG
CAINIA RIZAL (1262646)
VAT REG TIN# 230-393 680
SERIAL #: 59657D4800
MIN. 18022609502966397

4573222330305
MOSBEAU ADVANCE TAB
4806032200281
POTEN CEE PLUS C COL
P202.50 V
P570.00 V

SUBTOTAL P172.50

AMOUNT TO PAY P172.50
CASH P1000.00
CHANGE P227.50

Total of items sold = 2

| TAX CODE | AMOUNT | VAT AMT |
|-----------------|--------|---------|
| VAT SALE | 689.73 | 82.77 |
| VAT EXEMPT SALE | 0.00 | 0.00 |
| ZERO RATED SALE | 0.00 | 0.00 |
| TOTAL | 689.73 | 82.77 |

CASHIER NAME: FANUSAN
Sales Invoice No.: 0000163721
SI Reset Counter: 00000
00052 IR#7781 10-32-99 22NOV2020
502646 R102
"THIS SERVES AS YOUR SALES INVOICE"
BUYERS NAME:
ADDRESS:
TIN #:

TOTAL PAYMENT 1000.00
CHANGE 25.50

ORDER #00368
SOLD TO:
ADDRESS:
TIN:
BUSINESS STYLE:
Variable (C)
VAT-Exempt Sale (X)
VAT Zero Rated Sale(Z)
VAT - 12%
Amount Due 964.50

Received Merchandise in Good Condition
Sa Mercury Drug Makasisinguro Gamot
as Lasting Bagoll
Marawing Salamat Po.
Philology Systems, Inc.
433 Lt. Antigua St. Brgy. Corazon de
Mags. San Juan, Marikina
VAT REG TIN: 205-713-621-00000
Record No.: 042-206713621-000336-18104
Validity Date: 06/11/2008 - 07/31/2026
AU No.: FFI12014-116-0016420-00783

THIS INVOICE/RECEIPT SHALL BE VALID
FOR FIVE (5) YEARS FROM THE DATE OF
THE PERMIT TO USE
TXN#070901 11-21-20 03:45P eden
OR#110611325134
- THIS IS YOUR OFFICIAL RECEIPT -

TOTAL 964.50
AMOUNT TENDERED 1000.00
CASH 1000.00
TOTAL 964.50
915.00

| | | | |
|---------|-----------|-------------------|--------------|
| 193.001 | 30 @ 6.50 | VICKS VAPOR 100 | 4807886315 |
| 49.001 | | MEHNY EC THERIONA | 480712650071 |
| 182.501 | 5 @ 36.50 | VILFROD THERIONA | 480712650071 |
| 127.501 | 5 @ 25.50 | RISGEN PD THERMO | 480712650071 |
| 108.001 | 3 @ 36.00 | PRED 10 TAR 10MG | 480650575719 |
| 27.151 | 5 @ 5.43 | PEPARAZOM CAP40MG | 480034811332 |
| 278.751 | 5 @ 55.75 | | |

MR. 23 OG
ENUNION THE FOLL
4807886315
VICKS VAPOR 100
480712650071
MEHNY EC THERIONA
480712650071
VILFROD THERIONA
480712650071
RISGEN PD THERMO
480712650071
PRED 10 TAR 10MG
480650575719
PEPARAZOM CAP40MG
480034811332
MIN. 141101630232823 C1 5.301 19
TOSHIBA 4900 41-CHIEF ROOF 01061
TEL NO. (03) 2077-4406
VAT REG TIN#000-388-974-00783
Brgy. San Juan, Marikina, Rizal
CK Square, Ortigas Ave. Ext.
RIZAL CANTINA CK SQUARE