

## PURCHASE ORDER

PO No. 00001/PROC/IM/PO/X/2020

DATE

01 OKTOBER 2020

To : PT. INTIMEDIKA PUSPA INDAH

Attention : FAHMI

Faximile :

Phone : 087710579541

Deliver to

**RS. BRAWIJAYA SAHARJO**

Jl. DR.Saharjo no.199, Rw.01,

Tebet Barat, Kec. Tebet

Jakarta Selatan 12870

Contact Phone

Verdian

Contact Person

081234939492

Order by

RS.Brawijaya Saharjo-Farmasi

REQUIRED DELIVERY DATE			VENDOR'S QUOTATION	PROJECT CODE


NO	DESCRIPTION	QTY	UNIT	UNIT PRICE	DISKON	UNIT PRICE POST DISKON	AMOUNT
1	SALIENT SYRINGE 190ML	10	EACH	315,000	0%	315,000	3,150,000
2	EXTENSION TUBE 150CM T-CONNECTOR	5	EACH	115,000	0%	115,000	575,000

Sub Total	Rp	3,725,000
PPn 10%	Rp	372,500
TOTAL	Rp	4,097,500

### SPECIAL INSTRUCTIONS

Term of Payment : 30 hari dari tanggal faktur

Authorized by,

  
dr. Ditte Amelia Miranda

*All correspondence should be addressed to the above address and refer to our SO/PO number.  
Please return the original of this Service/Purchase Order together with your invoice to facilitate payment.*