

LA MISIÓN SUPERMERCADOS S.A. DE C.V.

R.F.C. MSU-940322-L J4

ORDEN DE COMPRA

Proveedor:

4173 - LABORATORIOS CLINIC, S. A. DE C. V.

Lugar de Entrega: 1 SUC MATRIZ

Condición Pago: 30 DIAS

Fecha de entrega: 2023-03-17

N°. Folio: 142788

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|------------|--|--|--|--|--|---|--|--|
| Artículo | C.P. | Cant. | UM | Descripción | Precio | Importe | IVA | IEPS |
| 5010726011 | | 144 | PZA | CLINIC CEP DENT DUCKY TC17-013 | 9.295 | 1338.48 | 214.156 | 0 |
| 79 | | | | | | | 8 | |
| 5010726500 | | 144 | PZA | CLINIC CEP DENT CLASICO TC50-014 | 9.685 | 1394.64 | 223.142 | 0 |
| 09 | | | | | | | 4 | |
| 5010726340 | | 144 | PZA | CLINIC CEP DENT DE VIAJE CON CAPUCHON | 8.71 | 1254.24 | 200.678 | 0 |
| 16 | | | | TC41-013 | | | 4 | |
| 5010726015 | | 96 | PZA | CLINIC CEP DENT ALL ROUNDER TC59-013 | 11.05 | 1060.8 | 169.728 | 0 |
| 99 | | | | | | | | |
| 5010726400 | | 72 | PZA | CEP. INFANTIL UNICORNIO TC15-011 | 9.1 | 655.2 | 104.832 | 0 |
| 24 | | | | | | | | |
| 5010726290 | | 72 | PZA | CLINIC CEP DENT TRANSPARENTE TC40-013 | 6.825 | 491.4 | 78.624 | 0 |
| 12 | | | | | | | | |
| 5010726290 | | 72 | PZA | CLINIC PAQUETE FAMILIAR TC44-013 | 17.875 | 1287 | 205.92 | 0 |
| 36 | | | | | | | | |
| 5010726400 | | 48 | PZA | CEPILLO CLINIC CARITAS TC-06-013 | 10.4 | 499.2 | 79.872 | 0 |
| 17 | | | | | | | | |
| 5010726011 | | 48 | PZA | CEP INFANTIL GUZZY TC16-013 | 11.7 | 561.6 | 89.856 | 0 |
| 62 | | | | | | | | |
| 5010726002 | | 48 | PZA | CLINIC CEP DENT GO BIMATERIAL TC42-013 | 13 | 624 | 99.84 | 0 |
| 57 | | | | | | | | |
| 5010726800 | | 48 | PZA | CEP. JOUNEY PLUS XOXO TC43-200 | 12.87 | 617.76 | 98.8416 | 0 |
| 20 | | | | | | | | |
| | 5010726011 79 5010726500 09 5010726340 16 5010726015 99 5010726400 24 5010726290 12 5010726290 36 5010726400 17 5010726011 62 5010726002 57 5010726800 | 5010726011 79 5010726500 09 5010726340 16 5010726015 99 5010726400 24 5010726290 12 5010726400 17 5010726011 62 5010726002 57 5010726800 | 5010726011 144 79 144 5010726500 144 09 144 5010726340 144 16 96 5010726015 96 99 72 24 72 5010726290 72 12 72 5010726290 72 36 72 5010726400 48 17 48 5010726011 48 62 48 5010726800 48 57 48 | 5010726011 144 PZA 79 144 PZA 5010726500 144 PZA 09 144 PZA 5010726340 144 PZA 5010726015 96 PZA 99 72 PZA 5010726290 72 PZA 12 72 PZA 5010726290 72 PZA 5010726400 48 PZA 5010726011 48 PZA 5010726002 48 PZA 5010726800 48 PZA | 144 PZA CLINIC CEP DENT DUCKY TC17-013 79 144 PZA CLINIC CEP DENT DUCKY TC17-013 79 5010726500 144 PZA CLINIC CEP DENT CLASICO TC50-014 09 5010726340 144 PZA CLINIC CEP DENT DE VIAJE CON CAPUCHON TC41-013 5010726015 96 PZA CLINIC CEP DENT ALL ROUNDER TC59-013 99 5010726400 72 PZA CEP. INFANTIL UNICORNIO TC15-011 24 5010726290 72 PZA CLINIC CEP DENT TRANSPARENTE TC40-013 12 5010726290 72 PZA CLINIC PAQUETE FAMILIAR TC44-013 36 5010726400 48 PZA CEPILLO CLINIC CARITAS TC-06-013 17 5010726400 48 PZA CEPILLO CLINIC CARITAS TC-06-013 57 5010726800 48 PZA CLINIC CEP DENT GO BIMATERIAL TC42-013 57 5010726800 48 PZA CEP. JOUNEY PLUS XOXO TC43-200 | 144 PZA CLINIC CEP DENT DUCKY TC17-013 9.295 79 | 144 PZA CLINIC CEP DENT DUCKY TC17-013 9.295 1338.48 79 144 PZA CLINIC CEP DENT DUCKY TC17-013 9.295 1338.48 79 144 PZA CLINIC CEP DENT CLASICO TC50-014 9.685 1394.64 09 144 PZA CLINIC CEP DENT DE VIAJE CON CAPUCHON 8.71 1254.24 16 TC41-013 11.05 1060.8 16010726015 96 PZA CLINIC CEP DENT ALL ROUNDER TC59-013 11.05 1060.8 10010726400 72 PZA CEP. INFANTIL UNICORNIO TC15-011 9.1 655.2 124 12 12 12 12 12 12 | 144 PZA CLINIC CEP DENT DUCKY TC17-013 9.295 1338.48 214.156 8 8 8 8 8 8 8 8 8 |

Subtotal \$ 9 784.32 IVA \$ 1 565.49 **IEPS** \$ 0.00 Total \$11 349.81

EN TÉRMINOS DE PAGO, SE RESPETARÁN LOS PRECIOS PACTADOS EN LA ORDEN DE COMPRA. UNA VEZ ENTREGADA LA MERCANCÍA, NO SE ACEPTAN MODIFICACIONES DE PRECIOS. SE SOLICITA REALIZAR UNA FACTURA POR CADA ORDEN DE COMPRA RECIBIDA.

> GLORIA MARIA CHARUR TUEME COMPRADOR