



INVOICE: 9110707759

Becton, Dickinson and Company
Tel: 855 417 1969
Email: Collections@bd.com
Federal ID No: 22-0760120
DUNS: 00-129-2192
www.bd.com

PLEASE REMIT TO: Becton, Dickinson and Company
21588 Network Place
Chicago IL 60673-1215

BILL-TO: CARDINAL MEDICAL PRODUCTS VL #DORP PO BOX 982279 EL PASO TX 79998-2279

SHIP-TO: CARDINAL MEDICAL PRODUCTS VL #DORP 6000 ROSA PARKS BLVD DETROIT MI 48208-1731
--

Customer Account: 1001000161	Customer PO: 4531122477	Invoice Date: 12/19/2022	Payment Terms: Net 31 Days	Page: 1 of 2
--	-----------------------------------	------------------------------------	--------------------------------------	------------------------

BD Sales Document: 5008323462	Drop Ship Reference:	Contact: CTC-BATCH
BD Delivery: 6026136577	Mode of shipment: Truck LTL- 1 Carrier	Shipped From: El Paso TX 79912-8000
Carrier Reference: CHR 1573221414	Carrier: C H ROBINSON (LTL DRY)	Freight Terms: FOB PER BD TERMS & CONDITIONS

LINE	PRODUCT NUMBER / GTIN	PRODUCT DESCRIPTION / CUSTOMER PRODUCT	QUANTITY SHIPPED	UOM SOLD	UNIT PRICES	TOTAL AMOUNTS	TAX/ NONTAX
850	4403A 20885403473125	SENSICLIP SURGICAL CLIPPER BLADE	19.000	CAS	114.00	2,166.00	
860	4406 20885403473149	BLADE CLIPPER SURG 4406	120.000	CAS	150.71	18,085.20	
940	930480 50354365400315	1ML CHLORAPREP APPLICATOR 930480	31.000	CAS	190.80	5,914.80	
950	930299 50354365400308	1.5ML CHLORAPREP FREPP APPLICATOR 930299	2.000	CAS	445.70	891.40	
960	930415 50354365400339	3ML CHLORAPREP HI-LITE ORANGE TINTED A 930415	18.000	CAS	137.15	2,468.70	
970	930700 50354365400346	10.5ML CHLORAPREP APPLICATOR 930700	18.000	CAS	453.65	8,165.70	
980	930715 50354365400353	10.5ML CHLORAPREP HI-LITE ORANGE TINTE 930715	27.000	CAS	485.30	13,103.10	
990	930725 50354365400360	10.5ML CHLORAPREP SCRUB TEAL TINTED AP 930725	3.000	CAS	485.30	1,455.90	

ORIGINAL



Becton, Dickinson and Company
Tel: 855 417 1969
Email: Collections@bd.com
Federal ID No: 22-0760120
DUNS: 00-129-2192
www.bd.com

INVOICE: 9110707759

PLEASE REMIT TO: Becton, Dickinson and Company
21588 Network Place
Chicago IL 60673-1215

Customer Account:	Customer PO:	Invoice Date:	Payment Terms:	Page:
1001000161	4531122477	12/19/2022	Net 31 Days	2 of 2

LINE	PRODUCT NUMBER / GTIN	PRODUCT DESCRIPTION / CUSTOMER PRODUCT	QUANTITY SHIPPED	UOM SOLD	UNIT PRICES	TOTAL AMOUNTS	TAX/ NONTAX
1000	930815 50354365400384	26ML CHLORAPREP HI-LITE ORANGE TINTED 930815	300.000	CAS	222.87	66,861.00	
1010	930825 50354365400391	26ML CHLORAPREP SCRUB TEAL TINTED APPL 930825	5.000	CAS	222.87	1,114.35	
		NET PRICE SUBTOTAL				120,226.15	
		SALES TAX SUBTOTAL				0.00	
		GRAND TOTAL				120,226.15	

TOTAL DUE:	USD	120,226.15
Due Date:	01/19/2023	

1. Any conditions specified by buyer to the contrary notwithstanding, the terms and conditions of sale set forth in your executed written agreement with BD or, if none, on the applicable BD order acknowledgement or price list sent to you ("Terms and Conditions") exclusively will govern the sale by BD of these goods to buyer. No addition or modification of the Terms and Conditions will be binding on BD unless agreed to in writing signed by an authorized representative of BD. BD objects to other terms and conditions that may be proposed by the buyer. Acceptance by BD of buyer's purchase order(s), issuance of this invoice and shipment of goods to buyer are each expressly conditioned on buyer's assent to all of the Terms and Conditions. Copies of such Terms and Conditions will be made available on request.

2. The price shown on this invoice is net of discounts provided at the time of purchase. Some of the products listed on this invoice may be subject to additional discounts. The value of any rebates, discounts, incentives, or product provided at no charge to customer may constitute a "discount or other reduction in price" under Section 1128B(b)(3)(A) of the Social Security Act [42 U.S.C. Sec. 1320a-7b(b)(3)(A)]. Customer shall satisfy any and all requirements imposed on buyers relating to discounts or reductions in price, including, when required by law, to disclose all discounts or other reductions in price received from BD and to accurately report under any state or federal health care program the net cost actually paid by customer.

ORIGINAL