PURCHASE ORDER

PT. KHIDMAT PERAWATAN JASA MEDIKA
JL. RAYA KEBAYORAN LAMA NO. 64
JAKARTA BARAT 11560
Tel:(021)5305288, 5347411 Fax:(021)53652855

SUPPLIER: TIARA KENCANA, PT

Purchase Order No.: PUR 32461
Purchase Date: 31/05/2023
Page No.: 1

Tel/Fax No.: /

DELIVERY TO: GUDANG FARMASI
RUMAH SAKIT MEDIKA PERMATA HIJAU

Expected Date:

Please Supply the following:

No	Type	Item Code	UOM	Qty	Unit Price	Amount	Discount	Sales Tax	Net Amount
1	IV	51900394	BOTOL	20	2,760	55,200	1,380.00 2.50%	5,920 11%	59,740
		BPJS-Paracetamol syr 60ml							
		Produk : Mersifarma TM, PT							
2	IV	51900529	B-50TAB	8	23,100	184,800	9,240.00 5.00%	19,312 11%	194,872
		BPJS-TRAMADOL 50 MG CAP							
		Produk : Mersifarma TM, PT							
3	IV	51900424	B-100TAB	8	8,046	64,368	4,827.60 7.50%	6,549 11%	66,090
		BPJS-CALCIUM LACTAT 100's							
		Produk : Mersifarma TM, PT							
4	IV	51900085	B-25AMP	4	42,000	168,000	16,800.00 10.00%	16,632 11%	167,832
		BPJS-FUROSEMID INJEKSI							
		Produk : Mersifarma TM, PT							
			Total:		472,368	32,248	48,413		488,534

Remarks: RUTIN (BPJS)
1. All goods not supplied to our specification will be rejected at your own expenses.
2. Terms of payment shall be 30 days from receipt of invoice.
3. We reserve the right to cancel this order if the above goods are not supplied with in the specified time.
4. In order to ensure prompt payment, all Delivery Order, Invoices and other documents related to this order must bear this Purchase Order Number.
5. Any goods supplied without our Purchase Order will not be entertained.

Issued By

Rumah Sakit MEDIKA PERMATA HIJAU
PURCHAS ORDER
BPJS Kesehatan

Zulfadlan Nasution

Verified By

Armina M.

Approved By

Dr. M. Zachruddin Habie, Sp
(Direktur RS)

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1st - Supplier's Copy, 2nd - Account's Copy c/w Invoice, 3rd - File copy