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Resolucion de Facturación electronica No. 18764054400390 de 2023-08-24, Rango 285 Al 100000 - Vigencia Desde: 2023-08-24 Hasta: 2024-02-24

DATOS DEL CLIENTE

NOMBRE: ALEIDA BAYONA GONZALES
DOCUMENTO: 1094575107-
TELEFONO: 3115303258
DIRECCION: BARRIO BONITO
CIUDAD: BOLÍVAR - SIMITÍ
CORREO: ALEIDABAYONA917@GMAIL.COM

FORMA DE PAGO: CONTADO

FACTURA DE VENTA N°

FE418

FECHA FACTURACION: 10-01-2024
FECHA VENCIMIENTO: 10-01-2024
VENDEDOR: ANGIE DAYANA PALACIO GOMEZ

| REF | GTIA | DESCRIPCIÓN | CANT | PRECIO U | IVA % | DESC % | TOTAL |
|---------------|------|-------------------------------------|----------------|----------|-------|--------|--------|
| 7703763070237 | 0 | AMOXICILINA 500MG LS X 10 CAP | 5 | 2,300 | 0 | 0 | 11,500 |
| 7703712030084 | 0 | AMPICILINA 500MG CP X 10 CAP | 5 | 3,800 | 0 | 0 | 19,000 |
| 7703038066620 | 0 | NIMESULIDA LP 100MG X 10TAB | 4 | 3,000 | 0 | 0 | 12,000 |
| 7703038050452 | 0 | NAPROXENO LP 500MG X 10TAB | 5 | 3,400 | 0 | 0 | 17,000 |
| 7707321982109 | 0 | DIHIDROCODEINA JBE X 120ML | 5 | 7,000 | 0 | 0 | 35,000 |
| 7702870006269 | 0 | SEVEDOL EF TAB | 30 | 900 | 0 | 0 | 27,000 |
| 3582910009900 | 0 | ENTEROGERMINA AMP | 6 | 5,500 | 0 | 0 | 33,000 |
| 7703202221312 | 0 | BUSCAPINA COMP TAB | 10 | 1,500 | 0 | 0 | 15,000 |
| 7703038010302 | 0 | ACETAMINOFEN JBE LP X 60ML | 5 | 2,400 | 0 | 0 | 12,000 |
| 7703038065630 | 0 | ACETAMINOFEN JBE LP X 90ML | 5 | 3,600 | 0 | 0 | 18,000 |
| 7703712014350 | 0 | DOLICOX GRIP CAP | 10 | 500 | 0 | 0 | 5,000 |
| 650240053160 | 0 | NEXT GL CAP | 8 | 1,500 | 0 | 0 | 12,000 |
| 7703153035051 | 0 | ESOMEPRAZOL 40MG CM X 25TAB | 2 | 5,000 | 0 | 0 | 10,000 |
| 7707397791636 | 0 | DOLEX FORTE TAB | 10 | 1,400 | 0 | 0 | 14,000 |
| 7702184011348 | 0 | METRONIDAZOL EC 500MG X 10TAB | 2 | 1,300 | 0 | 0 | 2,600 |
| 7706569020567 | 0 | ACETAMINOFEN AG 500MG X 100 TAB | 1 | 6,300 | 0 | 0 | 6,300 |
| 75916565 | 0 | VICK VAPORUB LATA X 12G | 5 | 4,300 | 0 | 0 | 21,500 |
| 7703381004348 | 0 | NIFLAMIN CAP | 5 | 4,500 | 0 | 0 | 22,500 |
| 7702057184315 | 0 | NORAVER GAR NM TAB | 10 | 1,500 | 0 | 0 | 15,000 |
| 7703763750115 | 0 | VITAMINA C LS 500MG X 10TAB | 1 | 1,800 | 0 | 0 | 1,800 |
| 7702057160968 | 0 | NORAVER G NOCHE SOBRE | 6 | 2,350 | 0 | 0 | 14,100 |
| 7703712034273 | 0 | VITAMINA C CP X 30 ML | 3 | 4,700 | 0 | 0 | 14,100 |
| 7704768002452 | 0 | VIT E 400 UI+ VIT A 3500 UI X 15CAP | 3 | 4,202 | 19 | 0 | 12,605 |
| 7702184011829 | 0 | ATORVASTATINA 40MG EC X 10TAB | 4 | 1,400 | 0 | 0 | 5,600 |
| 7703712035485 | 0 | HIDROX DE ALU SIME MAG CP X 360ML | 3 | 7,800 | 0 | 0 | 23,400 |
| 7703712014541 | 0 | GASTROFULL DA SACHET | 10 | 1,300 | 0 | 0 | 13,000 |
| 7706127005166 | 0 | STOPEN TAB | 6 | 1,600 | 0 | 0 | 9,600 |
| 7707232099255 | 0 | ACTIVOX ICE X 4 TABS | 4 | 1,800 | 0 | 0 | 7,200 |
| 7703202221282 | 0 | BUSCAPINA FEM TAB | 6 | 1,400 | 0 | 0 | 8,400 |
| 7706569020802 | 0 | LORATADINA AG 10MG X 10TAB | 2 | 1,000 | 0 | 0 | 2,000 |
| 7702057017361 | 0 | PANGETAN NF TAB | 10 | 1,000 | 0 | 0 | 10,000 |
| 7707355053363 | 0 | NOXPIRIN JBE X 120 ML | 3 | 9,800 | 0 | 0 | 29,400 |
| 7702057160463 | 0 | NORAVER GRIPA FT CAP | 10 | 2,200 | 0 | 0 | 22,000 |
| 7702870071502 | 0 | LUMBAL FORTE TAB | 12 | 1,600 | 0 | 0 | 19,200 |
| 7703546813303 | 0 | FLUOXETINA 20MG ND X 15 TAB | 2 | 1,400 | 0 | 0 | 2,800 |
| 7703252035457 | 0 | CURAS MEDICARE X 100 UND | 1 | 5,500 | 0 | 0 | 5,500 |
| 7707228360093 | 0 | GUANTES ALFASAFE T L X 100 U | 1 | 13,025 | 19 | 0 | 13,025 |
| 671875619583 | 0 | COLAGENO BIOTINA X 100 CAP | 1 | 36,000 | 0 | 0 | 36,000 |
| 7707457086955 | 0 | COLAGENO X 500ML | 1 | 27,000 | 0 | 0 | 27,000 |
| 7703712011366 | 0 | KRODEX F CAP | 10 | 1,400 | 0 | 0 | 14,000 |
| 7702132009656 | 0 | ADVIL MAX CAP | 8 | 1,600 | 0 | 0 | 12,800 |
| 7702186021697 | 0 | NAILEN # 0 | 1 | 5,882 | 19 | 0 | 5,882 |
| 7702035435989 | 0 | LUBRIDER EH X 200 ML | 1 | 15,126 | 19 | 0 | 15,126 |
| 7706462000178 | 0 | PROBIGEN SOBRE | 10 | 2,500 | 0 | 0 | 25,000 |
| 7702896001774 | 0 | MEBLAINEX 15MG/1,5ML AMP | 2 | 3,000 | 0 | 0 | 6,000 |
| 7703889062260 | 0 | INFLACOR RETARD 3 3 MG AMP | 2 | 8,000 | 0 | 0 | 16,000 |
| 7702870004821 | 0 | FEMELIN AMP X 0.5 ML | 5 | 9,000 | 00 | 0 | 45,000 |
| 7703038066262 | | METOCLOPRAMIDA 10MG X 10TAB | 1 | 1,000 | 00 | 0 | 1,000 |
| | | | Total Unidades | 262 | | | |

OBSERVACIONES

TOTALES

| | |
|-----------|----------------|
| NETO | 725,939 |
| DESCUENTO | 0 |
| IVA | 8,861 |
| RETENCION | 0 |
| TOTAL | 734,800 |

Cliente C.C

Vendedor C.C

CONDICIONES DE GARANTIA

Cufe: b72da88a25b43491d386bf064303bdb96655b278a94c74f2141acbd3ffa6e522464e7e08f1a9151ca686d2e7d04b84c5

Impreso por | PHARMAKOS - VICPOS -
