

## Purchase Order Form

To:  
SinaPharm Ltd.  
Dresdner Straße 62-64/2/12  
A1200 Vienna

Fax: +431408 610 620

E- Mail: office@sinapharm.com

Website: www.sinapharm.com

### Purchase Order

Description	Art. No.	Tablets/ Pack	Desired Quantity*			
			10 Pack	20 Pack	30 Pack	>30 Pack please specify
OsteoCalVit® <i>OP60</i>	206026	60 Pcs.				
OsteoCalVit® <i>OP30</i>	203027	30 Pcs.				
OsteoCalVit Fort® <i>OP60</i>	206028	60 Pcs.				
VivaVit® D3 <i>OP60</i>	206029	60 Pcs.				

SinaPharm Ltd's terms and conditions apply.

Minimum order value is € 60,00 not including shipping costs & VAT.

\*Interactive Form: You may select orders of 10-30 packs by clicking on them, or enter a number on the >30 Packs field.

\_\_\_\_\_  
Customer-No.

\_\_\_\_\_  
Mr./Ms.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature