

ORDER FORM

CUSTOMER NAME : _____ DATE : ____/____/____

CLINIC NAME : _____

BILLING ADDRESS : _____

SHIPPING ADDRESS : ☐ same as billing address

☐ Other: _____

CONTACT NUMBER : _____ EMAIL : _____

PRODUCT

SIZES

Examination glove

Pentanano Antimicrobial Nitrile Glove

Price = RM250.00 per carton*

* Each size is sold on a minimum of 1 carton

(Qty. per
Carton)

XS

☐

S

☐

M

☐

L

☐

XL

☐

REMARK (IF ANY) : _____

Term & Condition:

- Minimum one (1) carton per order.
- One (1) carton has 10 boxes (100 pieces per box).
- Price includes delivery within mainland peninsular Malaysia.
- FOMEMA Pharmaceuticals Sdn Bhd's banking account:-

Bank Name: **OCBC Bank Berhad**

Beneficiary: **FOMEMA Pharmaceuticals Sdn. Bhd.**

Account No.: **1041023488**

Acknowledge by Customer:

 Name:

 Date:

- Kindly email the payment slip together with the order form to:- **sales@fomemapharma.com.my**