



KOL PHARMA S.A.
RUC 155693173-2-2020 DV 27

Torre de las Américas, Torre A, Piso 12
Punta Pacífica - Panamá City, Panamá
Phone +507 8335655
info@kolpharma.com

Payment terms:
Shipping details:
Country of origin: ESTADOS UNIDOS

INVOICE

DATE	jun 18, 2025
INVOICE	LIEF082025
CLIENT	LIEF ORGANICS LLC
TAX ID	71-1038801
ADDRESS	28903 Avenue Paine Valencia
CITY/COUNTRY	CA 91355. Estados Unidos
ATTN	Sophie Hasuo

(US DOL)						
Nombre	Descripción	Lot	Expiration	Units	Unitary price	Total
Omedical Alipreqx				10.00	2.50 \$	25.00
					Sub-total	\$ 25.00
					Discounts	
					Total	\$ 25.00

Payment Instructions USD:

Intermediary Bank:
STANDARD CHARTERED BANK, NEW YORK
1 Madison
New York NY 10010-3603, United States
SWIFT: SCBLUS33

Beneficiary Bank:
MERCANTIL BANCO, S.A.
Panamá, Rep. de Panamá
SWIFT: MPANPAPA

Beneficiary Name:
Kol Pharma S.A.
Beneficiary Account:
03-202-01072-4