

PURCHASE ORDER FORM



Supplier name: Relief Goods Alliance BV
 Supplier address: [Redacted]

Mediq Nederland B.V.
 Acting as part of: the Landelijk Consortium Hulpmiddelen (LCH)
 Rijnzathe 10
 3454 PV Utrecht
 The Netherlands

Country: [Redacted]
 Contact person: [Redacted]
 Phone number: +316 [Redacted]
 Contact e-mail: [Redacted]@gmail.com

Invoice address: Accountspayable@mediq.com

Order number: LCH2020-0153
 Order date: 22-4-2020
 Reference name: [Redacted]
 Reference e-mail: [Redacted]@lchulpmiddelen.nl

BTW: NL854913981801
 KV/K: 62677926

Product/service details supplier	Quantity	Expected delivery date	Price per unit ex. VAT	Amount ex. VAT
KN95 Ryzur	100.000	29-apr-20	2,26	226.000,00
KN95 Ryzur	200.000	5-mei-20	2,26	452.000,00
KN95 Ryzur	300.000	7-mei-20	2,26	678.000,00
KN95 Ryzur	300.000	8-mei-20	2,26	678.000,00
KN95 Ryzur	300.000	10-mei-20	2,26	678.000,00
KN95 Ryzur	300.000	14-mei-20	2,26	678.000,00
KN95 Ryzur	600.000	17-mei-20	2,26	1.356.000,00
KN95 Ryzur	900.000	20-mei-20	2,26	2.034.000,00
KN95 Ryzur	1100.000	23-mei-20	2,26	2.486.000,00
KN95 Ryzur	1500.000	26-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	29-mei-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	1-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	4-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	7-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	10-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	13-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	16-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	19-jun-20	2,26	3.390.000,00
KN95 Ryzur	1500.000	22-jun-20	2,26	3.390.000,00
KN95 Ryzur	900.000	24-jun-20	2,26	2.034.000,00

Total order value (excl. VAT) € 45.200.000,00
 VAT €
 Total order value (incl. VAT) € 45.200.000,00

Downpayment: € 2.260.000,00
 Downpayment date: 24-4-2020
 Payment agreement: 100% payment after goods are finished and quality check has been done in factory
 Payment term (days): 1
 Other agreed terms: down payment per delivery

Delivery condition: FOB
 Named place: SHANGHAI / PVG

Principal name: [Redacted]
 Principal signature: [Redacted]

Delivery address: Centraal Boekhuis
 Laanakkerweg 14
 4131 PB Vianen

Supplier name: [Redacted]
 Supplier signature: [Redacted]

We kindly request you to check this order on product details, volume, delivery date, price and order value. Deviations need to be reported to the Finance department of LCH via purchaseorders@lchulpmiddelen.nl.

Delivery and billing need to be conducted stating the order number listed above.

Billing statement requires stating your VAT number and bank account details.

This purchase order, and any related agreement, is conducted under and governed by the general purchase conditions of Mediq Nederland B.V. which will be provided to you on your request. The Mediq general purchase conditions shall prevail over any general conditions of sale of the supplier, which are hereby expressly rejected.