

|                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  <p><b>FARMACIA</b><br/><b>FarmaSalud A</b><br/>Dir: Eplicachima s/n y Manuel Carrión Pinzano<br/>0982805892</p>                                 | <p><b>R.U.C.: 1105906406001</b></p> <p><b>F A C T U R A</b></p> <p>No. : 001-001-000051079</p> <p>NUMERO DE AUTORIZACION<br/><b>1002202601110590640600120010010000510790000000219</b></p> <p>FECHA Y HORA DE AUTORIZACION<br/><b>2026-02-10T17:55:59-05:00</b></p> <p>AMBIENTE : PRODUCCION</p> <p>EMISION : NORMAL</p> <p>CLAVE DE ACCESO</p> <div style="text-align: center;"> <br/> 1002202601110590640600120010010000510790000000219 </div> |
| <p><b>CHICAIZA NOBOA EMILY NATHALIA</b></p> <p><b>Direccion Matriz: LOJA / LOJA / SUCRE / LOS PALTAS Y MANUEL CARRION PINZANO</b></p> <p><b>OBLIGADO A LLEVAR CONTABILIDAD : NO</b></p> <p><b>CONTRIBUYENTE RÉGIMEN RIMPE</b></p> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

|                                            |                                  |
|--------------------------------------------|----------------------------------|
| <b>Razon Social / Nombres y Apellidos:</b> | CONSUMIDOR FINAL                 |
| <b>Identificacion:</b> 9999999999          | <b>Fecha Emision:</b> 10/02/2026 |
| <b>Guia Remision:</b>                      | <b>Direccion:</b> LOJA           |
| <b>Telefono :</b>                          | <b>Email:</b>                    |

| Cod. Principal                                                                                         | Cant. | Descripcion                       | Detalle Adicional         | Precio Unitario | Descuento   | Precio Total |
|--------------------------------------------------------------------------------------------------------|-------|-----------------------------------|---------------------------|-----------------|-------------|--------------|
| 1013                                                                                                   | 1.00  | APYRAL 1G TAB X 30 UNI            |                           | 0.25            | 0.00        | 0.25         |
| 2261                                                                                                   | 1.00  | IBUTRON FLASH 600MG X16 CAP UNI   |                           | 0.59            | 0.09        | 0.50         |
| 773                                                                                                    | 2.00  | GUANTES M EXAMMEDIC DENT X50P UNI |                           | 0.22            | 0.00        | 0.43         |
| INFORMACION ADICIONAL :                                                                                |       |                                   | SUBTOTAL 0%               |                 |             | 0.75         |
| BODEGA : PRINCIPAL<br>VENDEDOR:<br>OBSERVACIONES:<br>TIPO: 1<br>CODIGO: 51485<br>Fecha Maxima de Pago: |       |                                   | SUBTOTAL 5%               |                 |             | 0.00         |
|                                                                                                        |       |                                   | SUBTOTAL 12%              |                 |             | 0.00         |
|                                                                                                        |       |                                   | SUBTOTAL 15%              |                 |             | 0.43         |
|                                                                                                        |       |                                   | SUBTOTAL NO objeto de IVA |                 |             | 0.00         |
|                                                                                                        |       |                                   | SUBTOTAL Exento de IVA    |                 |             | 0.00         |
|                                                                                                        |       |                                   | SUBTOTAL SIN IMPUESTOS    |                 |             | 1.18         |
|                                                                                                        |       |                                   | TOTAL Descuento           |                 |             | 0.09         |
| Formas de Pago                                                                                         |       | Valor                             | Plazo                     | U.Tiempo        |             |              |
| SIN UTILIZACION DEL SISTEMA FINANCIERO                                                                 |       | 1.25                              |                           |                 | ICE         |              |
|                                                                                                        |       |                                   |                           |                 | IVA 5%      |              |
|                                                                                                        |       |                                   |                           |                 | IVA 12%     |              |
|                                                                                                        |       |                                   |                           |                 | IVA 15%     |              |
|                                                                                                        |       |                                   |                           |                 | VALOR TOTAL |              |