



PROFORMA INVOICE / PURCHASE ORDER					
EXPORTER : YORS PHARMACEUTICALS OFFICE NO 1314, 13th FLOOR 9, BUSINESS BAY OFF LINK ROAD, BEHIND EVERSINE MALL MALAD WEST, MUMBAI -400064, INDIA Contact No : +91-9930422272 / +91-8928515256 EMAIL : pavan.sureka@yorspharmaceuticals.com / export@yorspharmaceuticals.com		ORDER NO. & DT. PI/PO/2025/0017 8/Aug/25 PURCHASE ORDER REF NO. Work Order Reference No EXPORTER'S REF. I.E.C. NO.: 5017501282 GSTIN NO. 27AABFY8698R1ZS			
BUYER : Centrale d'Achat des Médicaments Vétérinaires (CAMVET) 03 BP 7033 Ouagadougou 03, BURKINA FASO Contact Person : Dr Nakié Gisèle PARE/ OUEDRAOGO E-mail ID :giselamail12@gmail.com albansawadogo@yahoo.fr Tel: +22670497583		CONSIGNEE: Centrale d'Achat des Médicaments Vétérinaires (CAMVET) 03 BP 7033 Ouagadougou 03, BURKINA FASO Contact Person : Dr Nakié Gisèle PARE/ OUEDRAOGO E-mail ID :giselamail12@gmail.com albansawadogo@yahoo.fr Tel: +22670497583			
PRE CARRIAGE BY	PLACE OF RECEIPT BY PRE-CARRIER	COUNTRY OF ORIGIN OF GOODS		COUNTRY OF FINAL DESTINATION	
N.A.	N.A.	INDIA		OUAGADOUGOU, BURKINA FASO	
VESSEL FLIGHT NO.	PORT OF LOADING	MODE OF SHIPMENT : SEA Term of the shipment : CIF - TEMA Sea Port GHANA PAYMENT TERMS : 1. 100 % Payment by IRREVOCABLE LETTER OF CREDIT with 60 days from date of BL Paiement à 100 % par LETTRE DE CRÉDIT IRREVOCABLE à 60 jours à compter de la date de BL			
PORT OF DISCHARGE	FINAL DESTINATION				
TEMA Port GHANA	OUAGADOUGOU, BURKINA FASO				
DESCRIPTION OF GOODS		PACK SIZE	QUANTITY IN (PACKS)	UNIT PRICE 'IN EURO'	AMOUNT
COMMERCIAL PRODUCTS(Veterinary medicine, Feed supplements and Additives)					
VETRESS		100 ML	5,000	€ 0.83	€ 4,150.00
MODUSEL FORTE-L(LIQUID)		1 LTR	4,000	€ 5.60	€ 22,400.00
ZOE BEN G 300		5 X 10 BLISTER	3,000	€ 2.70	€ 8,100.00
NOELAVITAZOL (POWDER)		1 kg JAR	2,000	€ 32.50	€ 65,000.00
NOTE: Freight charges propose by us in Proforma Inv are as per current situation, actual charges will be mention in Invoice at the time of dispatch.					
NOTE : A) CARGO IN TRANSIT TO OUAGADOUGOU VIA TEMA PORT,SHIPPER'S					
			PROMOTIONAL DISCOUNT		
BENEFICIARY BANK DETAILS :		INTERMEDIARY BANK DETAILS:			
YORS PHARMACEUTICALS ACCOUNT NO. : 50200076829873 BANKERS NAME : HDFC BANK ADDRESS : MINDSPACE MALAD (WEST) , MUMBAI -400064 MAHARASHTRA , INDIA SWIFT CODE : HDFCINBB		JPMORGAN CHASE BANK GRUENEBURG WEG 2, FRANKFURT AM MAIN 60322, GERMANY SWIFT CODE : CHASDEFXXX		TOTAL FOB FOB CHARGES INSURANCE FREIGHT TOTAL CIP Round off	
				€	99,650.00
				€	-
				€	-
				€	-
				€	-
TOTAL CIP BY SEA				€	99,650.00
AMOUNT CHARGEABLE in EURO(IN WORDS) : EURO NINETY NINE THOUSAND SIX HUNDRED FIFTY ONLY					
DELIVERY SCHEDULE FROM INDIA: - Consignment Schedule dispatch from warehouse for custom clearance will be within 45-60 days from date of confirmation of order					
Special Conditions charge interest at 14% per annum. 2. All sales supplies and dealings are subject to jurisdiction of courts at Mumbai, INDIA only. responsibility. control. We hereby certify that the goods mentioned above are of Indian origin			Signature & Date <div style="text-align: center;">  </div>		
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