

TARUN ENTERPRISES

H.O.: 8/8, Strachy Road, Allahabad - 211001, U.P., INDIA

Phone: +91 8176080204

e-mail: info@optitecheyecare.com, info@ophthalmic.in

GSTIN: 09ACBPJ0823B1ZA

Drug Licence No. ALLD/5/21B/385, ALLD/5/20B/388 Dt. 06.05.2008

Quotation / Performa Invoice

Q2021221696

Exporter: TARUN ENTERPRISES	Quotation No: Q2021221696	Quotation Date: December, 03, 2021	
H.O.: 8/8 Strachy Road, Allahabad - 211001, UP. INDIA Phone: +91 532 6590204 Email: info@optitecheyecare.com	Issued From: Allahabad	Currency: USD	
GST No: 09ACBPJ0823B1ZA Drug Licence: ALLD/5/21B/385,ALLD/5/20B/388 Dt. 06.05.2008	Insurance: customer to arrange	Sales Person: Tarun Jaggi	

Customer(Bill to):

Charles Wembley (s. E. A) Co. Pte Ltd 147a Than Nhan Trung Ward 13 Tan Binh Dist

Ho Chin Minch City, Viet Nam

Mobile: +84943951906

Email: admin-medical1@charleswembley.com

Ms Ms. Rachel

Consingee(Ship to):

Charles Wembley (s. E. A) Co. Pte Ltd 147a Than Nhan Trung Ward 13 Tan Binh Dist

Ho Chin Minch City, Viet Nam

Mobile: +84943951906

Email: admin-medical1@charleswembley.com

Ms Ms. Rachel

Terms of Delivery: within 15 days of confirmed order Terms of Payments: advance

Terms & Conditions:

Special instruction:

SI No	Product Description	HSN	Qty	Unit	Rate	Discount/Unit	Net Amount
1	castors, model OTT5.	94021090		Pcs	990	0	1980
2	${f EC~15}$ Examination Chair model EC 15: complete with standard fitment without castors.	94021090	1	Pcs	935	0	935
Net Total							
Freight Char						reight Charges	\$ 400
Grand Total							

Thank you for your interest in our range of equipment / supplies. We with pleasure offer the quotation as above for your kind consideration. We shall be happy to answer any of your questions in this regard. Banking details are as below.

Remit to:

Payment: 100% T/T(wire) **Bank Details for:** (USD)

Beneficiary's Name: Tarun Enterprises Account No.: 111963700000179 Bank Name: Yes Bank Limited (USD) **SWIFT Code:** YESBINBBDEL

Yes Bank Limited, 17/15/1 Maharishi Dayanand Marg, Thornhill Road, Civil Lines, Allahabad 211001, UP, **Bank Address:**

India

Bank remittance charge shall be paid by payer(buyer)

For Tarun Enterprises

Note - This quotation is valid up to 17-01-2022 | Document created by - admin This is a computer-generated document. No signature is required.