

## Quotation / Performa Invoice

## Q2020212044

<b>Exporter:</b> <b>TARUN ENTERPRISES</b> B.O. A96/1, Second Floor Phase II, Mayapuri Industrial Area New Delhi - 110064. Phone: +91 1147070362 Email: delhi@optitecheyecare.com GST No: 07ACBPJ0823B1ZE					<b>Quotation No:</b> Q2020212044			<b>Quotation Date:</b> December, 17, 2020	
					<b>Issued From:</b> Delhi			<b>Currency:</b> INR	
					<b>Insurance:</b>			<b>Sales Person:</b> Delhi	
<b>Customer(Bill to):</b> <b>Dr Shroff Charity Eye Hospital.</b> 5027 Kedarnath Road Daryaganj New Delhi, Delhi 110002, India Mobile: 011-43524444 Dr Sirs / Madam					<b>Consingee(Ship to):</b> <b>Dr Shroff Charity Eye Hospital.</b> 5027 Kedarnath Road Daryaganj New Delhi, Delhi 110002, India Mobile: 011-43524444 Dr Sirs / Madam				
<b>Terms of Delivery:</b>					<b>Terms of Payments:</b>				
<b>Terms &amp; Conditions:</b>									
<b>Special instruction:</b>									
<b>Sl No</b>	<b>Product Description</b>	<b>HSN-GST</b>	<b>MRP</b>	<b>Qty</b>	<b>Unit</b>	<b>Rate</b>	<b>Discount/Unit</b>	<b>Net Amount</b>	
1	12" HD VDO Magnifier   Low Vision Devices   12" HD Video Magnifier with standard fitments	90185090 12 %	137000.00	1	Pcs	122321.43	20794.64	101526.79	
<b>Net Total</b>								₹ 101526.79	
<b>Freight Charges</b>								₹ 0	
<b>GST @ 12%</b>								₹ 12183.21	
<b>Grand Total</b>								₹ 113710	

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)

**Beneficiary's Name :** Tarun Enterprises

**Bank Name :** HDFC Bank Ltd. (Rupee)

**Bank Address :** 18-AS.P. Marg, Civil Lines, Allahabad 211001, UP, India

**Bank Details for :** (INR)

**Account No. :** 13172020001243

**IFSC Code :** HDFC0000226

**Bank remittance charge shall be paid by payer(buyer)**

For Tarun Enterprises

Note - This quotation is valid up to 31-01-2021 | Document created by - delhi

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