



TARUN ENTERPRISES

H.O. : 8/8, Strachy Road, Allahabad -211001, U.P. India
Phone : +91 532 6590204
B.O. : A96/1, Second Floor, Phase II, Mayapuri Industrial Area
New Delhi-110064, Ph.; 011-47070362
e-mail: info@optitecheyecare.com

Quotation / Performa Invoice

Q00089

Exporter: TARUN ENTERPRISES H.O.: 8/8 Strachy Road, Allahabad - 211001, UP. INDIA Phone: +91 532 6590204 Email: info@optitecheyecare.com GST No: 09ACBPJ0823B1ZA Drug Licence: ALLD/5/21B/385,ALLD/5/20B/388 Dt. 06.05.2008	Quotation No: Q00089	Quotation Date: 18-04-2019					
	Issued From: Allahabad	Currency: INR					
	Insurance: Party Account	Generated by: Order					
Customer(Bill to): Shravan Medisales Pvt Ltd Shravan Medisales Pvt.ltd. Karve Sankul Office No. 123 1002 Sadashiv Peth Pune - 411030, Pune, Maharashtra, India Mobile: 020-24430373, 917588680034 Email: shravanmedisalespvtltd@gmail.com Mr Somnath	Consingee(Ship to): Shravan Medisales Pvt Ltd Shravan Medisales Pvt.ltd. Karve Sankul Office No. 123 1002 Sadashiv Peth Pune - 411030, Pune, Maharashtra, India Mobile: 020-24430373, 917588680034 Email: shravanmedisalespvtltd@gmail.com Mr Somnath						
Terms of Delivery: ASAP	Terms of Payments: 7 Days credit						
Terms & Conditions: Nill							
Sl No	Product Description	HSN	Qty	Pack	Rate	Disc(Per Pack)	Net Amount
1	Ophthalmic Solution Clear Visc 3 ml Pfs Hydroxypropyl Methyle Cellulose Solution	30067000	190	Boxes	60.0000	0.0000	11400.00
Net Total							₹ 11400.00
Freight Charges							₹ 500.00
GST @ 12%							₹ 1368.00
Grand Total							₹ 13268.00

Thank you for your interest in our company and products. We trust you will find the quote satisfactory. We look forward to your business.

Remit to:

Payment: 100% T/T(wire)

Bank Details for (INR)

Beneficiary's Name: Tarun Enterprises

Account No.: 13172020001243

Bank Name: HDFC Bank Ltd. (Rupee)

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

IFSC Code: HDFC0000226

Bank remittance charge shall be paid by payer(buyer)