

## 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

**Q-01096**

<b>Exporter:</b> <b>TARUN ENTERPRISES</b> 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		<b>Quotation No:</b> Q-01096		<b>Quotation Date:</b> 25-11-2019			
		<b>Issued From:</b> Allahabad		<b>Currency:</b> USD			
		<b>Insurance:</b> To be borne by the party.		<b>Generated by:</b> Joydeep C			
<b>Customer(Bill to):</b> <b>Bioimmun Med. Lab. Diag. Llc</b> Address: Ground Floor Al Safa Paradise Building Oud Metha Po Box 36889 Dubai 36889, United Arab Emirates Mobile: +971 4 3578007 I, +97 0566651925 Email: biomed@bioimmunme.com Ms Marycris Malabaguio		<b>Consignee(Ship to):</b> <b>Bioimmun Med. Lab. Diag. Llc</b> Address: Ground Floor Al Safa Paradise Building Oud Metha Po Box 36889 Dubai 36889, United Arab Emirates Mobile: +971 4 3578007 I, +97 0566651925 Email: biomed@bioimmunme.com Ms Marycris Malabaguio					
<b>Terms of Delivery:</b> Against Purchase Order		<b>Terms of Payments:</b> 100% Advance Payment					
<b>Terms &amp; Conditions:</b> Freight Charge as per actuals - Door to Door Deliver : DHL/FedEx							
<b>Special instruction:</b> Not for Sale. Only for Demo Purposes. Bills & Duties to be borne by the party.							
<b>Sl No</b>	<b>Product Description</b>	<b>HSN</b>	<b>Qty</b>	<b>Unit</b>	<b>Rate</b>	<b>Discount/Unit</b>	<b>Net Amount</b>
1	Wire Speculum 0500(Adult)   Wire Speculum(Adult) Model no. 0500	90185090	5	Pcs	1.0000	0.0000	5.00
<b>Net Total</b>							\$ 5.00
<b>Freight Charges</b>							\$ 0.00
<b>Grand Total</b>							\$ 5.00

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. Please note, all banking charges shall be paid by the buyer.

Remit to:

**Payment :** 100% T/T(wire)  
**Beneficiary's Name :** TARUN ENTERPRISES  
**Bank Name :** AXIS BANK LTD  
**Bank Address :** 28B CIVIL STATION MG MARG CIVIL LINES ALLAHABAD

**Bank Details for :** (USD)  
**Account No. :** 914020052016222  
**SWIFT Code :** AXISINBB286

For Tarun Enterprises

Note - This quotation is valid up to 09-01-2020  
This is a computer-generated document. No signature is required.



## 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

Order In Process

**Q-01096 / O-00898**

<b>Exporter:</b> <b>TARUN ENTERPRISES</b> 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			<b>Order No:</b> O-00898			<b>Order Date:</b> November, 25, 2019		
			<b>Issued From:</b> Allahabad			<b>Currency:</b> USD		
			<b>Insurance:</b> To be borne by the party.			<b>Generated by:</b> Joydeep C		
<b>Customer(Bill to):</b> <b>Bioimmun Med. Lab. Diag. Llc</b> Address: Ground Floor Al Safa Paradise Building Oud Metha Po Box 36889 Dubai 36889, United Arab Emirates Mobile: +971 4 3578007 I, +97 0566651925 Email: biomed@bioimmunme.com Ms Marycris Malabaguio			<b>Consingee(Ship to):</b> <b>Bioimmun Med. Lab. Diag. Llc</b> Address: Ground Floor Al Safa Paradise Building Oud Metha Po Box 36889 Dubai 36889, United Arab Emirates Mobile: +971 4 3578007 I, +97 0566651925 Email: biomed@bioimmunme.com Ms Marycris Malabaguio					
<b>Terms of Delivery:</b> Against Purchase Order			<b>Terms of Payments:</b> 100% Advance Payment					
<b>Terms &amp; Conditions:</b> Freight Charge as per actuals - Door to Door Deliver : DHL/FedEx								
<b>Special instruction:</b> Not for Sale. Only for Demo Purposes. Bills & Duties to be borne by the party.								
<b>S.N.</b>	<b>Product Description</b>	<b>HSN</b>	<b>Qty</b>	<b>Unit</b>	<b>Rate</b>	<b>Discount/Unit</b>	<b>Net Amount</b>	
1	Wire Speculum 0500(Adult)   Wire Speculum(Adult) Model no. 0500	90185090	5	Pcs	1.0000	0.0000	5.00	
<b>Net Total</b>							\$ 5.00	
<b>Freight Charges</b>							\$ 0.00	
<b>Grand Total</b>							\$ 5.00	

Greetings!

Thank you for your valued order. Same is under process. We request you to please check all the details as above and arrange payment as per banking details below. In case you wish to use online payment , please use our payment gateway at our website [www.optitecheyecare.com/payment.php](http://www.optitecheyecare.com/payment.php) .

Remit to:

**Payment :** 100% T/T(wire)  
**Beneficiary's Name :** TARUN ENTERPRISES  
**Bank Name :** AXIS BANK LTD  
**Bank Address :** 28B CIVIL STATION MG MARG CIVIL LINES ALLAHABAD

Bank remittance charge shall be paid by payer(buyer)

**Bank Details for :** (USD)  
**Account No. :** 914020052016222  
**SWIFT Code :** AXISINBB286

For Tarun Enterprises

Order Processing Team

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## 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

DISPATCH CHALLAN From

**Q-01096 / O-00898 / C-00921**

<b>Bill to:</b> <b>Bioimmun Med. Lab. Diag. Llc</b> Address: Ground Floor Al Safa Paradise Building Oud Metha Po Box 36889 Dubai 36889, United Arab Emirates Mobile: +971 4 3578007 I, +97 0566651925 Email: biomed@bioimmunme.com Ms Marycris Malabaguio					<b>Ship to:</b> <b>Bioimmun Med. Lab. Diag. Llc</b> Address: Ground Floor Al Safa Paradise Building Oud Metha Po Box 36889 Dubai 36889, United Arab Emirates Mobile: +971 4 3578007 I, +97 0566651925 Email: biomed@bioimmunme.com Ms Marycris Malabaguio				
<b>Challan No.</b>		C-00921			<b>Invoice No:</b>				
<b>Challan Date.</b>		November, 25, 2019			<b>Invoice Date:</b>				
<b>Customer Id:</b>		380			<b>Method Of Shipment:</b>				
<b>Order No:</b>		O-00898			<b>Date Of Shipment:</b>		November, 25, 2019		
<b>Sales Person:</b>		JoydeepC			<b>Docket No:</b>				
<b>Dispatched From:</b>		Allahabad			<b>SB Number:</b>				
<b>Terms of Delivery:</b> Against Purchase Order					<b>Terms of Payments:</b> 100% Advance Payment				
<b>Terms &amp; Conditions</b> Freight Charge as per actuals - Door to Door Deliver : DHL/FedEx					<b>Special Information:</b> Not for Sale. Only for Demo Purposes. Bills & Duties to be borne by the party.				
S.N.	Product Description	HSN	Unit	Qty	Rate	Batch No	Mfg Dt./Exp Dt.	Discount/Unit	Net Amount
1	Wire Speculum 0500(Adult)   Wire Speculum(Adult) Model no. 0500	90185090	Pcs	5	1.0000	TE/WS/0500	04-2019/03-2029	0.0000	5.00
								<b>Net Total</b>	\$ 5.00
								<b>Freight Charges</b>	\$ 0.00
								<b>Grand Total</b>	\$ 5.00

Doc No. TE/F-7.5-07 For Tarun Enterprises | BANK AD CODE: 6360295  
Prepared by Joydeep C| Packed by

This is a computer-generated document. No signature is required.





# Tax Invoice

**Tarun Enterprises**  
8/8 Strachy Road  
PRAYAGRAJ(ALLAHABAD) - 211001 UP  
India  
GSTIN/UN: 09ACBPJ0823B1ZA  
State Name : Uttar Pradesh, Code : 09  
Contact : 7275050650  
E-Mail : info@optitecheyecare.com  
**Branch(s): Civil lines Allahabad**

**Consignee**  
**Bioimmun Med. Lab. Diag. LLC**  
Ground Floor, Al Safa Paradise Bldg. Oud  
Metha, Dubai, Po Box # 36889 I

**Buyer (if other than consignee)**  
**Bioimmun Med. Lab. Diag. LLC**  
Ground Floor, Al Safa Paradise Bldg. Oud  
Metha, Dubai, Po Box # 36889 I

Contact : +971 4 35780071  
E-Mail : biomed@bioimmunme.com

Country of Origin of Goods <b>India</b>	Country of Final Destination <b>UAE</b>
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Invoice No. <b>E161</b>	Dated <b>25-Nov-2019</b>
Delivery Note <b>C 00921</b>	Mode/Terms of Payment <b>FOC</b>
Supplier's Ref.	Other Reference(s) <b>QT-Q01096 25.11.2019</b>
Buyer's Order No. <b>000 898</b>	Dated <b>25-Nov-2019</b>
Despatch Document No.	Delivery Note Date <b>25-Nov-2019</b>
Despatched through <b>DHL EXPRESS</b>	Destination <b>DUBAI</b>
Vessel/Flight No.	Place of receipt by shipper: <b>Allahabad-</b>
City/Port of Loading <b>New Delhi</b>	City/Port of Discharge <b>Dubai</b>

Terms of Delivery  
**NO COMMERCIAL VALUE**  
**VALUE FOR CUSTOM \$5.00**  
**NOT FOR SALE**  
**ONLY FOR SAMPLE**

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Speculum Wire Adult 0500</b> Godown : Main Location  Batch No. TEWS/0500 MFg Dr, 04-2019 Exp Dt, 03-2029		5 PP 5 PP	\$ 1.00	PP	\$ 5.00
Total			5 PP			\$ 5.00

Amount Chargeable (in words)  
**USD. Five Only**

E. & O.E

Company's PAN : **ACBPJ0823B**  
Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Company's Bank Details  
Bank Name : **Standard Chartered Bank - 6250 5001 845**  
A/c No. : **6250 5001 845**  
Branch & IFS Code : **Allahabad & SCBL0036044**

for Tarun Enterprises

Prepared by \_\_\_\_\_ Verified by \_\_\_\_\_ Authorised Signatory \_\_\_\_\_

SUBJECT TO PRAYAGRAJ,(ALLAHABAD) JURISDICTION

This is a Computer Generated Invoice





EXPRESS WORLDWIDE **WPX** **DHL**

2019-11-25 MYDHL+ 1.0 / \*3D-0821\*

From : TARUN ENTERPRISES  
MS NEELAM  
8/8, STRACHY ROAD  
Civil Lines, Allahabad

Origin:  
**VIF**

211001 ALLAHABAD Uttar Pradesh  
India

Contact: +918176080204

To : Bioimmun Med Lab, Diag. LLC  
Ms. Marycris Malabagulo  
Ground Floor Al Safa Paradise Building Oud  
Metha Po Box 36889

Contact:  
Ms. Marycris Malabagulo  
+97143578007  
biomed@biommune.com

**DUBAI**  
United Arab Emirates

**AE-DXB-MEY**

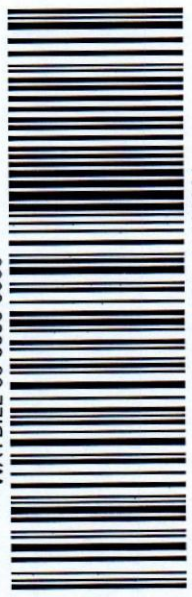
**C** **Day Time**

Ref: E161

Pce/Shpt Weight Piece  
**0.5 kg 1/1**

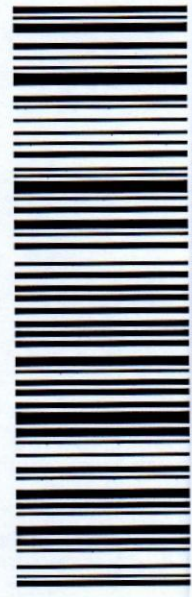


WAYBILL 66 6653 5330



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