

## 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

**Q2021222147**

<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> Q2021222147			<b>Quotation Date:</b> February, 08, 2022		
				<b>Issued From:</b> Allahabad			<b>Currency:</b> INR		
				<b>Insurance:</b> customer account			<b>Sales Person:</b> Tarun Jaggi		
<b>Customer(Bill to):</b> <b>Dr. Vipin Kumar</b> Faridabad, Haryana, India Mobile: +91 8287455770 Email: kumarvipin6187@gmail.com				<b>Consingee(Ship to):</b> <b>Dr. Vipin Kumar</b> Faridabad, Haryana, India Mobile: +91 8287455770 Email: kumarvipin6187@gmail.com					
<b>Terms of Delivery:</b> normally in stock				<b>Terms of Payments:</b> 100% advance					
<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	<b>RB 100</b>   Rose Bengal Ophthalmic strip 1.5 mg   box of 100 strips.	90185090 12 %	224.00	1	Boxes	200	40	160	
2	<b>FL100 (DOM)</b>   Fluorescein Sodium Ophthalmic strip 1mg USP   box of 100 strips.	30049099 12 %	252.00	1	Boxes	225	60.75	164.25	
3	<b>SCH 100 Box -Domestic</b>   Schirmer Tear Test Ophthalmic strip SCH 100   Box of 100 Strips	90185090 12 %	224.00	1	Boxes	200	0	200	
4	<b>LIS 100</b>   Lissamine Green Ophthalmic Strip 1.5 mg   box of 100 strips.	90185090 12 %	196.00	1	Boxes	175	0	175	
<b>Net Total</b>								₹ 699.25	
<b>Freight Charges</b>								₹ 50	
<b>GST @ 12%</b>								₹ 83.91	
<b>GST @ 18%</b>								9	
<b>Grand Total</b>								₹ 842.16	

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)**

Quotation / Performa Invoice

**Q2021222147**

For Tarun Enterprises

Note - This quotation is valid up to 25-03-2022 | Document created by - order

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