

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 NOTE

Q2020210605 / O2020210627 / C2020210604

Thank You for valued order.					
Bill to:		Ship to:			
Dr Gunjan Prakash		Dr Gunjan Prakash			
B-2/22		B-2/22			
Kamla Nagar		Kamla Nagar			
Agra-282005		Agra-282005			
Uttar Pradesh, Uttar Pradesh, India		Uttar Pradesh, Uttar Pradesh, India			
Mobile: +91 94119 91632		Mobile: +91 94119 91632			
Dr Gunjan Prakash		Dr Gunjan Prakash			
Challan No.	C2020210604	Invoice No:	430		
Challan Date.	June, 12, 2020	Invoice Date:	June, 12, 2020		
Customer Id:	1014	Method Of Shipment:	speed post		
Order No:	O2020210627	Date Of Shipment:	June, 12, 2020		
Sales Person:	Order Processing	Docket No:	EU221035694IN		
Dispatched From:	Allahabad	SB Number:			
Terms of Delivery: Terms of Payments: 7 D			Days Credit		
Special Information : Terms & Conditions :					
S.N. Product Description				Unit	Qty
Size M Latex EGP Latex Examination Gloves Powdered Size M pack of 50.				Boxes	2

Doc No. TE/F-7.5-07 For Tarun Enterprises Prepared by Order Processing | Packed by

Remit to:

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

Beneficiary's Name :Tarun EnterprisesAccount No. :13172020001243Bank Name :HDFC Bank Ltd. (Rupee)IFSC Code :HDFC0000226

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

Bank remittance charge shall be paid by payer(buyer)

For Tarun Enterprises

Order Processing Team

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