

## **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

### Q2020212476 / O2020212536 / C2020212365

Bill to: Ship to:											
Kesarwani Dental Clinic						Kesarwani Dental Clinic					
9-c 2/5 Near Agnipath Colony Tb Sapru Road Civil Lines,							9-c 2/5 Near Agnipath Colony Tb Sapru Road Civil Lines,				
Prayagraj, Uttar Pradesh							Prayagraj, Uttar Pradesh				
211001, India							211001, India				
Mobile: 9415614060							Mobile: 9415614060				
Dr Anil Kesarwani							Dr Anil Kesarwani				
Chal	lan No.	C2020212365					Invoice No:				
Chal	lan Date.	February, 12, 2021					Invoice Date:				
Cust	omer Id:	1322					Method Of Shipment:		By Hand		
Orde	r No:	O2020212536					Date Of Shipment:				
Sales	Person:	ManojPandey					Docket No:		Mahendar		
Dispa	atched From:	Allahabad					SB Number:				
Terms of Delivery: By hand Mahendra at 5.30pm						Terms of Payments : Same Days					
Terms & Conditions: Order on call					Special Information :						
S.N.	Product Description	HSN-GST	Unit	Qty	Rate	H	Batch No	Mfg Dt./Exp Dt.		Discount/Unit	Net Amount
1	Size M Latex EGP   Latex Examination Gloves Powdered  Size M   pack of 50.	4015 12 %	Pkt	10	348.21	TE/LEGM/201101		11-2020/10-2025		125	2232.14
Net Total											₹ 2232.14
Freight Charges											₹ 0
GST @ 12%											₹ 267.86
GST @ 18%											₹ 0
Grand Total											₹ 2500

Doc No. TE/F-7.5-07 For Tarun Enterprises | BANK AD CODE: 05100052900009 Prepared by Manoj Pandey| 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



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