

## 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

**Q2021221715**

<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> Q2021221715				<b>Quotation Date:</b> December, 04, 2021	
				<b>Issued From:</b> Allahabad				<b>Currency:</b> INR	
				<b>Insurance:</b> Party account				<b>Sales Person:</b> Manoj Pandey	
<b>Customer(Bill to):</b> <b>Varanasi Eye Foundation</b> L 6/58 Shastri Nagar In Front Of Ip Mall Sagra, Varanasi, Uttar Pradesh, India Mobile: 8800701329 Dr Deepak Kumar				<b>Consingee(Ship to):</b> <b>Varanasi Eye Foundation</b> L 6/58 Shastri Nagar In Front Of Ip Mall Sagra, Varanasi, Uttar Pradesh, India Mobile: 8800701329 Dr Deepak Kumar					
<b>Terms of Delivery:</b> By courier				<b>Terms of Payments:</b> 7 days credit					
<b>Terms &amp; Conditions:</b> order on whatsapp									
<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>4921 Capsulorhexis 45 Degree-TT</b>   Micro Instruments 23Gauge 4921 Capsulorhexis 45 Degree-TT	90185090 12 %	6500.00	1	Pcs	5803.57	892.86	4910.71	
2	<b>3002 Lachrymal dilator size - 3</b>   Lachrymal dilator size - 3   Model 3002	90185090 12 %	370.00	1	Pcs	330.36	0	330.36	
3	<b>4580 Chalazion Forcep</b>   Chalazion Forcep   Model 4580	90185090 12 %	600.00	1	Pcs	535.71	89.29	446.43	
<b>Net Total</b>								₹ 5687.5	
<b>Freight Charges</b>								₹ 0	
<b>GST @ 12%</b>								₹ 682.5	
<b>GST @ 18%</b>								0	
<b>Grand Total</b>								₹ 6370	

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

**Q2021221715**

For Tarun Enterprises

Note - This quotation is valid up to 18-01-2022 | Document created by - domestic

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