



TARUN ENTERPRISES

H.O. : 8/8, Strachy Road, Allahabad -211001, U.P. India

Phone : +91 532 6590204

B.O. : A96/1, Second Floor, Phase II, Mayapuri Industrial Area

New Delhi-110064, Ph.; 011-47070362

e-mail: info@optitecheyecare.com

Quotation / Performa Invoice

Q00124

Exporter: TARUN ENTERPRISES 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				Quotation No: Q00124			Quotation Date: 20-04-2019	
				Issued From: Allahabad			Currency: USD	
				Insurance: - customer account			Generated by: Admin	
Customer(Bill to): Jv Vision Healthcare Sdn Bhd 7-01-1 Lorong Batu Nilam 1a Bandar Bukit Tinggi Klang, Darul Ehsan, Selangor 41200, Malaysia Mobile: +60102405768 Email: jvvision@rainbowmeditech.com Dr Thanga Babu				Consingee(Ship to): Jv Vision Healthcare Sdn Bhd 7-01-1 Lorong Batu Nilam 1a Bandar Bukit Tinggi Klang, Darul Ehsan, Selangor 41200, Malaysia Mobile: +60102405768 Email: jvvision@rainbowmeditech.com Dr Thanga Babu				
Terms of Delivery: - normally ready stock				Terms of Payments: - advance payment				
Terms & Conditions: - freight as per actual								
Sl No	Product Description	HSN	Qty	Pack	Rate	Disc(Per Pack)	Net Amount	
1	FL 100 CE Fluorescein Sodium 1mg USP 100 strips in a box 1 uze Ophthalmic Strips.	90185090	1000	Boxes	5.0000	0.0000	5000.00	
Net Total							\$ 5000.00	
Freight Charges							\$ 0.00	
Grand Total							\$ 5000.00	

Thank you for your interest in our company and products. We trust you will find the quote satisfactory. We look forward to your business.

Remit to:

Payment: 100% T/T(wire)

Bank Details for (USD)

Beneficiary's Name: TARUN ENTERPRISES

Account No.: 914020052016222

Bank Name: AXIS BANK LTD

Bank Address: 28B CIVIL STATION MG MARG CIVIL LINES ALLAHABAD

SWIFT Code: AXISINBB286

Bank remittance charge shall be paid by payer(buyer)