

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

Order In Process

Q2021220415 / O2021220424

GST @ 12%

GST @ 18%

Grand Total

₹ 426.00

₹ 4389.00

63.00

| | Order No: O2021220424 | | | Order Date: May, 19, 2021 | | | |
|--|-----------------------------|--|---|--|----------------------------------|--|--|
| 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 | | Issued From: Allahabad | | | Currency: INR | | |
| | | Insurance: Party Account | | | Generated by: Chandresh Singh | | |
| | Consingee(Ship to): | | | | | | |
| | Grewal Eye Institute | | | | | | |
| | | | | | | | |
| | Sector 9c | | | | | | |
| Chandigarh, Chandigarh | | | Chandigarh, Chandigarh | | | | |
| 160009, India | | | · · | | | | |
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| | 5 - 5 | | | | | | |
| | Dr S. P. S. Grewal | | | | | | |
| Terms of Delivery: By Courier Terms of Payments: Advance Payment | | | | | | | |
| Terms & Conditions: Order Against | | | | | | | |
| Special instruction: | | | | | | | |
| HSN-GST | Qty | Unit | Rate | Discount/Unit | Net Amount | | |
| 5603 12 % | 50 | Pcs | 135.7143 | 64.7143 | 3550.00 | | |
| Net Total | | | | | ₹ 3550.00 | | |
| Freight Charges | | | | | ₹ 350.00 | | |
| | HSN-GST 5603 | Issued Free Allahabad Insurance Party Acco Consinger Grewal Ey Sco 168 - Sector 9c Chandigar 160009, In Mobile: 98 Email: billi Dr S. P. S. Terms of 19000000000000000000000000000000000000 | Issued From: Allahabad Insurance: Party Account Consingee(Ship to): Grewal Eye Institute Sco 168 - 169 Sector 9c Chandigarh, Chandigat 160009, India Mobile: 9876116769 Email: billing@gei.co. Dr S. P. S. Grewal Terms of Payments: HSN-GST Qty Unit 5603 50 Pcs | Issued From: Allahabad Insurance: Party Account Consingee(Ship to): Grewal Eye Institute Sco 168 - 169 Sector 9c Chandigarh, Chandigarh 160009, India Mobile: 9876116769 Email: billing@gei.co.in Dr S. P. S. Grewal Terms of Payments: Advance P | O2021220424 May, 19, 2021 | | |

Greetings!

Thank you for your valued order. Same is under process. We request you to please check all the details as above and arrange payment as per banking details below. In case you wish to use online payment, please use our payment gateway at our website www.optitecheyecare.com/payment.php.

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.