

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

Q00082

Exporter: TARUN ENTERPRISES B.O. A96/1, Second Floor Phase II, Mayapuri Industrial Area New Delhi - 110064. Phone: +91 1147070362 Email: delhi@optitecheyecare.com GST No: 07ACBPJ0823B1ZE			Quotati Q00082	Quotation No: Quotation Q00082 17-04-201		te:	
			Issued I	Issued From: Currency: INR			
				Insurance: - customer account Generated by: Admin			
Customer(Bill to): My Healthskape Medicals Pvt Ltd House 55b Village Hastal Uttam Nagar New Delhi, Delhi 110059, India Mobile: 9323716856 Email: iccha@myhealthskape.com Miss Iccha GST No.: 07AADCM4683K1Z3			My Hea House 5 Uttam N New Del 110059, Mobile: Email: ic Miss Icc	Consingee(Ship to): My Healthskape Medicals Pvt Ltd House 55b Village Hastal Uttam Nagar New Delhi, Delhi 110059, India Mobile: 9323716856 Email: iccha@myhealthskape.com Miss Iccha GST No.: 07AADCM4683K1Z3			
Terms of Delivery: - ready stock				Terms of Payments: - 4 days credit			
Terms & Conditions: - 4 days credit							
Sl No Product Description	HSN	Qty	Pack	Rate	Disc(Per Pack)	Net Amount	
1 Trial Lens Set Full aperture	90185090	6	Boxes	12000.0000	2500.0000	57000.00	
					Net Total	₹ 57000.00	
Freight Charges						₹ 0.00	
					GST @ 12%	₹ 6840.00	
					Grand Total	₹ 63840.00	

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** (INR)

Beneficiary's Name: Tarun Enterprises

Account No.: 13172020001243

Bank Name: HDFC Bank Ltd. (Rupee)

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

IFSC Code: HDFC0000226

Bank remittance charge shall be paid by payer(buyer)