

## 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

Q-00808

Exporter:	Quotation No:	Quotation Date:	
TARUN ENTERPRISES	Q-00808	September, 20, 2019	
H.O.: 8/8 Strachy Road, Allahabad - 211001, UP. INDIA		_	
Phone: +91 532 6590204	Issued From:	Currency:	
Email: info@optitecheyecare.com	Allahabad	USD	
GST No: 09ACBPJ0823B1ZA	Insurance:	Congrated by	
Drug Licence: ALLD/5/21B/385,ALLD/5/20B/388		Generated by:	
Dt. 06.05.2008	[] customer to arrange, his	Tarun Jaggi	
Dt. 00.00.2000	account		

Customer(Bill to):

Mmds

Amman, Jordan

Mobile: +96279655000 Email: amer1@mmds-jo.com

Dr Amer Al - Mokbel

Terms of Delivery: [] normally ready stock

Consingee(Ship to):

Terms of Payments: [] advance

Terms & Conditions: [] USD 200 per shipment for freight charges [] Drugs/WP/2559659/2019

## **Special instruction:**

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Sl No	Product Description	HSN	Qty	Unit	Rate	Discount/Unit	Net Amount	
	<b>Opti Fl 20%</b>   Ophthalmic Solution   OptiFL 20% Fluorescein Sodium Injection IP 20%   10 ampules per box	30063000	40	Boxes	20.0000	8.0000	480.00	
Net Total							\$ 480.00	
Freight Charges						\$ 0.00		
Grand Total						\$ 480.00		

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. Please note, all banking charges shall be paid by the buyer.

Remit to:

**Payment:** 100% T/T(wire) **Bank Details for:** (USD)

Beneficiary's Name :TARUN ENTERPRISESAccount No. :914020052016222Bank Name :AXIS BANK LTDSWIFT Code :AXISINBB286

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

For Tarun Enterprises

Note - This quotation is valid up to 04-11-2019

This is a computer-generated document. No signature is required.