

Order In Process

**Q2021222429 / O2021222154**

|   |   |                  |  |             |             |                                       |                   |  |
|---|---|------------------|--|-------------|-------------|---------------------------------------|-------------------|--|
| <b>Exporter:</b><br><b>TARUN ENTERPRISES</b><br>B.O. A96/1, Second Floor Phase II, Mayapuri Industrial Area New Delhi - 110064.<br>Phone: +91 1147070362<br>Email: delhi@optitecheyecare.com<br>GST No: 07ACBPJ0823B1ZE |   |                  | <b>Order No:</b><br>O2021222154  |             |             | <b>Order Date:</b><br>March, 04, 2022 |                   |  |
|   |   |                  | <b>Issued From:</b><br>Delhi   |             |             | <b>Currency:</b><br>INR               |                   |  |
|   |   |                  | <b>Insurance:</b>  |             |             | <b>Generated by:</b><br>Delhi         |                   |  |
| <b>Customer(Bill to):</b><br><b>City Eye Care</b><br>5c-14 Bpsardar Kulbir Marg New Industrial Town, Faridabad, Haryana<br>121001, India<br>Mobile: 9717630564<br>Email: drop.anand@yahoo.com<br>Dr O.p.anand           |   |                  | <b>Consignee(Ship to):</b><br><b>City Eye Care</b><br>5c-14 Bpsardar Kulbir Marg New Industrial Town, Faridabad, Haryana<br>121001, India<br>Mobile: 9717630564<br>Email: drop.anand@yahoo.com<br>Dr O.p.anand |             |             |                                       |                   |  |
| <b>Terms of Delivery:</b>   |   |                  | <b>Terms of Payments:</b>  |             |             |                                       |                   |  |
| <b>Terms &amp; Conditions:</b> Instruction by Ratnesh Sir.  |   |                  |  |             |             |                                       |                   |  |
| <b>Special instruction:</b> For replacement   |   |                  |  |             |             |                                       |                   |  |
| <b>S.N.</b>   | <b>Product Description</b>  | <b>HSN-GST</b>   | <b>Qty</b>   | <b>Unit</b> | <b>Rate</b> | <b>Discount/Unit</b>                  | <b>Net Amount</b> |  |
| 1   | <b>AH 18</b>   Visual Acuity Vision Chart  <br>Model AH 18   with standard fitments<br>FDA D 369614 | 90185090<br>12 % | 1  | Pcs         | 25892.8571  | 25892.8571                            | 0.00              |  |
| <b>Net Total</b>  |   |                  |  |             |             |                                       | ₹ 0.00            |  |
| <b>Freight Charges</b>  |   |                  |  |             |             |                                       | ₹ 0.00            |  |
| <b>GST @ 12%</b>  |   |                  |  |             |             |                                       | ₹ 0.00            |  |
| <b>GST @ 18%</b>  |   |                  |  |             |             |                                       | 0.00              |  |
| <b>Grand Total</b>  |   |                  |  |             |             |                                       | ₹ 0.00            |  |

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](http://www.optitecheyecare.com/payment.php) .

Remit to:

|   |   |                           |                |
|---|---|---------------------------|----------------|
| <b>Payment :</b>  | 100% T/T(wire)  | <b>Bank Details for :</b> | (INR)          |
| <b>Beneficiary's Name :</b>                                 | Tarun Enterprises                                       | <b>Account No. :</b>      | 13172020001243 |
| <b>Bank Name :</b>  | HDFC Bank Ltd. (Rupee)                                  | <b>IFSC Code :</b>        | HDFC0000226    |
| <b>Bank Address :</b>                                       | 18-AS.P. Marg, Civil Lines, Allahabad 211001, UP, India |                           |                |
| <b>Bank remittance charge shall be paid by payer(buyer)</b> |   |                           |                |
| For Tarun Enterprises                                       |   |                           |                |

Order Processing Team

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