

DISPATCH CHALLAN

Q2021222549 / O2021222238 / C2021222042

Bill to: Shravan Medicare Office No. 12/a 1/a Dhanwantari Complex 2014 Tilak Road Sadashiv Peth, Pune, Maharashtra 411030, India Mobile: 022 - 24486815, 9422512720, 9422876023 Email: infoeyecaredistributors@gmail.com Mr Amol Subhashrao Chandore GST No.: 27ATYPC7456P4ZI Drug Licence no.: MH-PZ1-350154,MH-PZ1-350155						Ship to: Shravan Medicare Office No. 12/a 1/a Dhanwantari Complex 2014 Tilak Road Sadashiv Peth, Pune, Maharashtra 411030, India Mobile: 022 - 24486815, 9422512720, 9422876023 Email: infoeyecaredistributors@gmail.com Mr Amol Subhashrao Chandore GST No.: 27ATYPC7456P4ZI Drug Licence no.: MH-PZ1-350154,MH-PZ1-350155			
Challan No.		C2021222042				Invoice No:			
Challan Date.		March, 22, 2022				Invoice Date:			
Customer Id:		1480				Method Of Shipment:		Shree Triupati courier	
Order No:		O2021222238				Date Of Shipment:			
Sales Person:		ChandreshSingh				Docket No:			
Dispatched From:		Allahabad				SB Number:			
Terms of Delivery :						Terms of Payments :			
Terms & Conditions :						Special Information :			
S.N.	Product Description	HSN-GST	Unit	Qty	Rate	Batch No	Mfg Dt./Exp Dt.	Discount/Unit	Net Amount
1	FL100 (DOM) Fluorescein Sodium Ophthalmic strip 1mg USP box of 100 strips.	30049099 12 %	Boxes	10	225	TE/FL/2202	01-2022/12-2026	64.29	1607.14
Net Total									₹ 1607.14
Freight Charges									₹ 100
GST @ 12%									₹ 192.86
GST @ 18%									₹ 18
Grand Total									₹ 1918

Doc No. TE/F-7.5-07 For Tarun Enterprises | BANK AD CODE: 05100052900009
Prepared by Chandresh Singh| Packed by

Remit to:

Payment : 100% T/T(wire)

Beneficiary's Name : Tarun Enterprises

Bank Name : HDFC Bank Ltd. (Rupee)

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

Bank remittance charge shall be paid by payer(buyer)

Bank Details for : (INR)

Account No. : 13172020001243

IFSC Code : HDFC0000226

For Tarun Enterprises

Order Processing Team

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