

## 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

**Q2020212252**

<b>Exporter:</b> <b>TARUN ENTERPRISES</b> 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	<b>Quotation No:</b> Q2020212252	<b>Quotation Date:</b> January, 13, 2021						
	<b>Issued From:</b> Allahabad	<b>Currency:</b> INR						
	<b>Insurance:</b> party accounts	<b>Sales Person:</b> Order Processing						
<b>Customer(Bill to):</b> <b>Premier Healthcare International</b> Old # 43 New No.38 1st Floor 8th Cross Street Shenoy Nagar West Chennai, Tamil Nadu 600030, India Mobile: 26208353, 9884327124 Email: premier.healthcare@yahoo.in Mr Uday GST No.: 33ANVPG3413F1Z7	<b>Consingee(Ship to):</b> <b>Premier Healthcare International</b> Old # 43 New No.38 1st Floor 8th Cross Street Shenoy Nagar West Chennai, Tamil Nadu 600030, India Mobile: 26208353, 9884327124 Email: premier.healthcare@yahoo.in Mr Uday GST No.: 33ANVPG3413F1Z7							
<b>Terms of Delivery:</b> stock ready		<b>Terms of Payments:</b> Advance						
<b>Terms &amp; Conditions:</b>								
<b>Special instruction:</b>								
<b>Sl No</b>	<b>Product Description</b>	<b>HSN-GST</b>	<b>MRP</b>	<b>Qty</b>	<b>Unit</b>	<b>Rate</b>	<b>Discount/Unit</b>	<b>Net Amount</b>
1	<b>LIS 100</b>   Lissamine Green Ophthalmic Strip 1.5 mg   box of 100 strips.	90185090 12 %	196.00	1	Boxes	175	35	140
2	<b>RB 100</b>   Rose Bengal Ophthalmic strip 1.5 mg   box of 100 strips.	90185090 12 %	196.00	1	Boxes	175	35	140
<b>Net Total</b>								₹ 280
<b>Freight Charges</b>								₹ 0
<b>GST @ 12%</b>								₹ 33.6
<b>GST @ 18%</b>								0
<b>Grand Total</b>								₹ 313.6

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.

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 Details for :** (INR)

**Account No. :** 13172020001243

**IFSC Code :** HDFC0000226

**Bank remittance charge shall be paid by payer(buyer)**

For Tarun Enterprises

Note - This quotation is valid up to 27-02-2021 | Document created by - domestic  
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