

**Request letter for Submission of Export documents against advance remittance received for release of EDF/ Shipping Bill/ SOFTEX form.**

To,  
The Manager  
YES Bank Limited  
17/15/1, Maharishi Dayanand Marg  
Thornhill Road, Civil Lines,  
Allahabad-211001



Date: 04-08-2021

Sub: Submission of Export documents against advance remittance received for release of EDF/Shipping Bill/SOFTEX form.  
Bill Amount: USD 2370 Tenor: Advance

We enclose herewith the following Export Documents:

Documents	Invoice	Transport Doc. (B/L /AWB/ LR)	EDF / S.B. / SOFTEX FORM
Original -1	E 21-22/026	7739 4723 8500	2358346
Duplicate			TO BE SUBMITTED IN ORIGINAL ONLY

Inward remittance Reference Number	003FINW211590239 USD 2232 DT. 08.06.2021 003FINW210890083 USD 2508 DT. 30.03.2021 (Note:- USD 126 ADJUST earlier submission shipping bill no. 99450082 date:07.04.2021)i.e. USD 2232+126=2370
Name of the remitter	WINFAME (USA )INC
Name of the buyer	WINFAME (USA) INC
EDF / Shipping Bill / SOFTEX Form no.	2358346 DATE: 11.06.2021
Date of Transport Doc. (AWB / BL / LR)	FEDEX- 7739 4723 8500 DT. 09.06.2021
** If the above mentioned documents are being submitted after expiry of 21 days from date of shipment, than please briefly describe the reason for delay in submission of document	N.A.
We are eligible to export the above mentioned goods under the current Foreign Trade policy in place and our I.E. Code is:	I.E. Code no: - 0689008139

Debit all charges for processing of above-mentioned documents from account no. 111963700000179 with your Thornhill Road, Civil Lines branch - Prayagraj.

**Declaration - Cum - Undertaking**

I / We hereby declare that the above transaction does not involve, and is not designed for the purpose of any contravention or evasion of the provisions of the FEMA 1999 or of any rule, regulation, notification, direction or order made there under. I/we hereby undertake that goods exported are not banned under EXIM policy. I / We also hereby agree and undertake to give such information/ documents as will reasonably satisfy you about this transaction in terms of the above declaration. I/ We also undertake that if I/ We refuse to comply with any such requirements or make only unsatisfactory compliance therewith, the bank shall refuse in writing to undertake the transaction and shall if it has reason to believe that any contravention /evasion is contemplated by me /us report the matter to Reserve Bank Of India. \*I / We further declare that the undersigned has/have authority to give this declaration and undertaking on behalf of the firm/company.

For TARUN ENTERPRISES

EYECARE  
MEDICAL DEVICES  
SKILL DEVELOPMENT

H.O. : 8/8, Strachy Road, Prayagraj, (Allahabad)-211001, U.P. India  
Phone : +91 8176080204, e-mail: info@optitecheyecare.com  
B.O. : A96/1, Second Floor, Phase II, Mayapuri Industrial Area, New Delhi-110064  
Phone: +91 11 47070362, e-mail: delhi@optitecheyecare.com

Proprietor



# Tax Invoice

(SUPPLY MEANT FOR EXPORT/SUPPLY TO SEZ UNIT OR SEZ DEVELOPER FOR AUTHORISED OPERATIONS UNDER BOND OR LETTER OF UNDERTAKING WITHOUT PAYMENT OF IGST)

## Tarun Enterprises

8/8 Strachy Road  
Civil Lines, Allahabad-211001  
Phone No. 8176080204  
GSTIN/UIN: 09ACBPJ0823B1ZA  
State Name : Uttar Pradesh, Code : 09  
CIN: TAN #ALDT00302B  
E-Mail : accounts@optitecheyecare.com  
Consignee (Ship to)

## Winfame (USA) Inc

710 S, Myrtle Ave., # 189,  
Monrovia, Ca 91016  
United States  
Mobile:001-626-255-7268  
Mobile:001-626-255-7268,+16262567268  
email:winfame@winfameusa.com  
Contact Person:Mrs. Lulu  
Buyer (Bill to)

## Winfame (USA) Inc

710 S, Myrtle Ave., # 189,  
Monrovia, Ca 91016  
United States  
Mobile:001-626-255-7268,+16262567268  
Email:Winfame@winfameusa.Com  
Contact Person:Mrs. Lulu  
State Name : California

Invoice No.	e-Way Bill No.	Dated
<b>E 21-22/026</b>	<b>431182651878</b>	<b>9-Jun-21</b>
Delivery Note	Mode/Terms of Payment	
<b>C-2021220470</b>	<b>YES BANK LTD.</b>	
Reference No. & Date.	Other References	
<b>O-2021220506 dt. 9-Jun-21</b>	<b>Q-2021220485</b>	
Buyer's Order No.	Dated	
<b>BY EMAIL</b>	<b>9-Jun-21</b>	
Dispatch Doc No.	Delivery Note Date	
<b>7739 4723 8500</b>	<b>9-Jun-21</b>	
Dispatched through	Destination	
<b>FEDEX- DT:09.06.2021</b>	<b>USA</b>	
Vessel/Flight No.	Place of receipt by shipper:	
	<b>ALLAHABAD</b>	
City/Port of Loading	City/Port of Discharge	
<b>NEW DELHI</b>	<b>CALIFORNIA</b>	
Country: <b>United States of America</b>		
LUT/Bond No.: <b>AD090421008112R</b>		
From: <b>06-04-2021</b> To: <b>31-03-2022</b>		
Terms of Delivery		
<b>100% Advance</b>		
<b>Owner / Operator Number:10062380</b>		
<b>Registration Number:3003951061</b>		
<b>Product Code:HJB,LGY,HND</b>		

S. No.	Description of Goods and Services	HSN/SAC	Quantity	Rate	per	Amount
1	<b>Trypan Blue 0.6% (Non CE)</b> Batch : TE/TB-1V/2101 Mfg Dt. : Mar-2021 Expiry : 28-Feb-2023	30049099	<b>50 Boxes</b> 50 Boxes	\$ 7.00	Boxes	<b>\$ 350.00</b>
2	<b>CTR 810 Capsular Tension Ring</b> Batch : 82105085 Mfg Dt. : May-2021 Expiry : 30-Apr-2026	90185090	<b>100 PP</b> 100 PP	\$ 6.00	PP	<b>\$ 600.00</b>
3	<b>Smile Set- TT</b> Batch : TE/SSTT/01 Mfg Dt. : Jun-2021 Expiry : 31-May-31	90185090	<b>3 Set</b> 3 Set	\$ 390.00	Set	<b>\$ 1,170.00</b>
						<b>\$ 2,120.00</b>
<b>FREIGHT CHARGES EXPORT GST</b>						<b>\$ 250.00</b>
<b>Total</b>						<b>\$ 2,370.00</b>

Amount Chargeable (in words)

**USD. Two Thousand Three Hundred Seventy Only**

Company's Bank Details

A/c Holder's Name : **Tarun Enterprises**  
Bank Name : **Yes Bank A/C -111963700000179**  
A/c No. : **111963700000179**  
Branch & IFS Code : **Civil Lines, Allahabad & YESB0001119**  
SWIFT Code :

Company's PAN/ IEC Code: **ACBPJ0823B**

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

for Tarun Enterprises

Authorised Signatory

SUBJECT TO ALLAHABAD JURISDICTION

This is a Computer Generated Invoice



**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

**DISPATCH CHALLAN**

**Q2021220485 / O2021220506 / C2021220470**

<b>Bill to:</b> <b>Winfame Usa Inc</b> 911 S. Primrose Ave Ste. O Monrovia, California 91016, United States Mobile: +16262567268 Email: winfame@winfameusa.com Mrs Lulu					<b>Ship to:</b> <b>Winfame Usa Inc</b> 911 S. Primrose Ave Ste. O Monrovia, California 91016, United States Mobile: +16262567268 Email: winfame@winfameusa.com Mrs Lulu				
<b>Challan No.</b>		C2021220470			<b>Invoice No:</b>		5026		
<b>Challan Date.</b>		June, 08, 2021			<b>Invoice Date:</b>		9/6/2021		
<b>Customer Id:</b>		531			<b>Method Of Shipment:</b>		FEDEX		
<b>Order No:</b>		O2021220506			<b>Date Of Shipment:</b>		9-6-2021		
<b>Sales Person:</b>		Tarun Jaggi			<b>Docket No:</b>		77394663 8468		
<b>Dispatched From:</b>		Allahabad			<b>SB Number:</b>				
<b>Terms of Delivery :</b> ready					<b>Terms of Payments :</b> advance				
<b>Terms &amp; Conditions :</b>					<b>Special Information :</b>				
S.N.	Product Description	HSN	Unit	Qty	Rate	Batch No	Mfg Dt./Exp Dt.	Discount/Unit	Net Amount
1	<b>Tissue Blue 1ml Vial (NC)  </b> Ophthalmic Solution   Tissue Blue, 1 ml Vial   box of 5   neutral code.	30049099	Boxes	50	7	TE/TB-1V/2101	03-2021/02-2023	0	350
2	<b>CTR 810   Ophthalmic</b> Disposable Device   Endocapsular Tension Ring 0810	90185090	Boxes	100	6	82105085	05-2021/04-2026	0	600
3	<b>Smile Set-TT   Smile Set</b> Consists of each 1 Pc in Titanium  Smile lenticule Forcep  Smile Lenticule Spatula Round Smile Microhook Single Round  Smile Micro hook Single Ended Smile Dissector C Spoon Round D.E Smile Dissector C Taneri Spoon D.E Smile Dissector D.E Smile Lenticule retractor D.E Lieberman Speculum	90185090	Boxes	3	390	TE/SSTT/01	06-2021/05-2031	0	1170
<b>Net Total</b>								\$ 2120	
<b>Freight Charges</b>								\$ 250	
<b>Grand Total</b>								\$ 2370	

Doc No. TE/F-7.5-07 For Tarun Enterprises | BANK AD CODE: 0410003-2900009  
Prepared by Tarun Jaggi| Packed by

Remit to:

**Payment :** 100% T/T(wire)  
**Beneficiary's Name :** Tarun Enterprises

**Bank Details for :** (USD)  
**Account No. :** 111963700000179



**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

**DISPATCH CHALLAN**

**Q2021220485 / O2021220506 / C2021220470**

**Bank Name :** Yes Bank Limited (USD)

**SWIFT Code :**

YESBINBBDEL

**Bank Address :** Yes Bank Limited, 17/15/1 Maharishi Dayanand Marg, Thornhill Road, Civil Lines, Allahabad 211001, UP, India

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

For Tarun Enterprises

Order Processing Team

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