

DISPATCH CHALLAN

Q2020212785 / O2021220161 / C2021220226

Bill to: Dexa Care Pvt Ltd B-1/d-1 Mohan Cooperative Industrial Estate New Delhi 110044, India Mobile: 79290080425 Email: d70@dexacare.com Ms Poonam						Ship to: Dexa Care Pvt Ltd B-1/d-1 Mohan Cooperative Industrial Estate New Delhi 110044, India Mobile: 79290080425 Email: d70@dexacare.com Ms Poonam			
Challan No.		C2021220226				Invoice No:			
Challan Date.		April, 22, 2021				Invoice Date:			
Customer Id:		1374				Method Of Shipment:		On Dot	
Order No:		O2021220161				Date Of Shipment:			
Sales Person:		TarunJaggi				Docket No:			
Dispatched From:		Allahabad				SB Number:			
Terms of Delivery : April 2021						Terms of Payments : advance			
Terms & Conditions :						Special Information :			
S.N.	Product Description	HSN	Unit	Qty	Rate	Batch No	Mfg Dt./Exp Dt.	Discount/Unit	Net Amount
1	Opti Fl 10% Ophthalmic Solution Fluorescein Sodium Injection 10% box of 10 ampules of 5 ml each.	30063000	Boxes	20	758.93	21AC026	03-2021/12-2023	227.68	10625
Net Total									₹ 10625
Freight Charges									₹ 100
GST @ 12%									₹ 1275
GST @ 18%									₹ 18
Grand Total									₹ 12018

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

Remit to:

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

For Tarun Enterprises

Order Processing Team

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