

## **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

Q2021221237

Exporter: TARUN ENTERPRISES	<b>Quotation No:</b> Q2021221237	<b>Quotation Date:</b> September, 27, 2021	
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>Issued From:</b> Allahabad	Currency: INR	
	Insurance: [] CUSTOMER ACCOUNT	<b>Sales Person:</b> Tarun Jaggi	

Customer(Bill to):

Swami Rama Himalayan University

Swami Ram Nagar Jolly Grant, Dehradun, UttraKhand

248016, India

Mobile: 0135 2471226 Email: mmd@srhu.edu.in Dr Renu Dhasmana

Terms of Delivery: [] NORMALLY IN STOCK, OTHER WISE 2-3

WEEKS TIME.

Consingee(Ship to):

**Swami Rama Himalayan University** 

Swami Ram Nagar Jolly Grant, Dehradun, UttraKhand

248016, India

Mobile: 0135 2471226 Email: mmd@srhu.edu.in Dr Renu Dhasmana

Terms of Payments: [] ON DELIVERY

## **Terms & Conditions:**

**Special instruction:** [] DEMONSTRATION AND INSTALLATION SHALL BE DONE BY OUR TEAM [] 12 MONTHS WARRANTY ON THE INSTRUMENT FROM THE DATE OF INVOICE [] AMC Rs..18000 per year AFTER THE WARRANTY for next TWO YEARS [] VALIDITY IS 60DAYS FROM ISSUE [] GST 12% [] INSTRUMENT TABLE SHALL BE PART OF THE QUOTATION.

Sl No	Product Description	HSN-GST	MRP	Qty	Unit	Rate	Discount/Unit	Net Amount
	REM 4000   REM 4000   Endothelium Microscope from Rodenstock with standard fitments.	90185090 12 %	1320500.00	1	Pcs	1179017.86	0	1179017.86
Net Total								
Freight Charges								₹ 5000
GST @ 12%								₹ 141482.14
GST @ 18%								900
Grand Total							₹ 1326400	

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) **Bank Details for:** (INR)

Beneficiary's Name :Tarun EnterprisesAccount No. :13172020001243Bank 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



## **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

Q2021221237

Note - This quotation is valid up to  $11-11-2021 \mid Document$  created by - admin This is a computer-generated document. No signature is required.