

TARUN ENTERPRISES

B.O.: A96/1, Second Floor Phase II, Mayapuri Industrial Area New Delhi - 110064, INDIA Phone: +91 8176080204

e-mail: delhi@optitecheyecare.com

GSTIN: 07ACBPJ0823B1ZE

DISPATCH NOTE

Q2021221230 / O2021221132 / C2021221039

Thank You for valued order.					
Bill to:		Ship to:			
Y K Sulekha Singh		Y K Sulekha Singh			
Sarat Pally Near Adda Po: South Dhadka		Sarat Pally Near Adda Po: South Dhadka			
Asansol, Bardhaman, West Benga		Asansol, Bardhaman, West Benga			
713302, India		713302, India			
Mobile: 7908403413		Mobile: 7908403413			
Ms Y K Sulekha Singh		Ms Y K Sulekha Singh			
Challan No.	C2021221039	Invoice No:	TE 21-22/087		
Challan Date.	September, 27, 2021	Invoice Date:	September, 27, 2021		
Customer Id:	1627	Method Of Shipment:	By Hand		
Order No:	O2021221132	Date Of Shipment:	September, 27, 2021		
Sales Person:	Delhi	Docket No:	party pickup		
Dispatched From:	Delhi	SB Number:	NA		
Terms of Delivery: Terms of Paymo			: CASE PAYMENT		
Special Information: INSTRUCTION BY SANCHIT SIR Terms & Conditions:					
S.N. Product Description			Unit	Qty	
1 4.3 Low Vision Device, 4.3" video magnifier with standard fitments.				Pcs	1

Doc No. TE/F-7.5-07 For Tarun Enterprises

Prepared by Delhi | Packed by

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

Order Processing Team

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