



## TARUN ENTERPRISES

H.O. : 8/8, Strachy Road, Allahabad -211001, U.P. India  
Phone : +91 532 6590204  
B.O. : A96/1, Second Floor, Phase II, Mayapuri Industrial Area  
New Delhi-110064, Ph.; 011-47070362  
e-mail: info@optitecheyecare.com

Order In Process

000144

<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>Order No:</b> 000144	<b>Order Date:</b> May, 02, 2019					
	<b>Issued From:</b> Allahabad	<b>Currency:</b> USD					
	<b>Insurance:</b>	<b>Generated by:</b> Admin					
<b>Customer(Bill to):</b> <b>Suthipong Jommongkol</b> 125/64 Ladpraow 87 Klongjaokungsing Wangthongland Ladpraow Bangkok 10310, Thailand Mobile: +66851683940 Email: sutthipong69@hotmail.com Mr Sutthipong Jommongkol (peet)	<b>Consingee(Ship to):</b> <b>Suthipong Jommongkol</b> 125/64 Ladpraow 87 Klongjaokungsing Wangthongland Ladpraow Bangkok 10310, Thailand Mobile: +66851683940 Email: sutthipong69@hotmail.com Mr Sutthipong Jommongkol (peet)						
<b>Terms of Delivery:</b>		<b>Terms of Payments:</b>					
<b>Terms &amp; Conditions:</b> - free trade samples - speed post parcel							
<b>S.N.</b>	<b>Product Description</b>	<b>HSN</b>	<b>Qty</b>	<b>Pack</b>	<b>Rate</b>	<b>Disc (Per Pack)</b>	<b>Net Amount</b>
1	<b>Tissue Blue 1ml Vial (NC)</b>   Ophthalmic Solution   Tissue Blue, 1 ml Vial   box of 5   neutral code.	30042019	10	Boxes	1.0000	0.0000	10.00
2	<b>Z SERIES 2.8MM DOUBLE BEVELLED UP ANGLED</b>   OPHTHALMIC MICROSURGICAL KNIVES  Z SERIES 2.8MM DOUBLE BEVELLED UP ANGLED Box of 10	90185090	1	Boxes	1.0000	0.0000	1.00
3	<b>Z SERIES 2.8MM DOUBLE BEVELLED UP STRAIGHT</b>   OPHTHALMIC MICROSURGICAL KNIVES  Z SERIES 2.8MM DOUBLE BEVELLED UP STRAIGHT Box of 10	90185090	1	Boxes	1.0000	0.0000	1.00
<b>Net Total</b>							\$ 12.00
<b>Freight Charges</b>							\$ 0.00
<b>Grand Total</b>							\$ 12.00

Greetings!

Thank you for your valued order. Same is under process. We request you to please check all the details as above and arrange payment as per banking details below. In case you wish to use online payment , please use our payment gateway at our website [www.optitecheyecare.com](http://www.optitecheyecare.com) .

Remit to:

**Payment :** 100% T/T(wire)  
**Bank Details for** (USD)  
**Beneficiary's Name:** TARUN ENTERPRISES  
**Account No.:** 914020052016222  
**Bank Name:** AXIS BANK LTD  
**Bank Address:** 28B CIVIL STATION MG MARG CIVIL LINES ALLAHABAD  
**SWIFT Code:** AXISINBB286  
Bank remittance charge shall be paid by payer(buyer)

For Tarun Enterprises

Order Processing Team

Created by (Admin )