

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

Quotation / Performa Invoice

Q00429

<u>-</u>		Quotation Date: 03-07-2019	
	Issued From: Allahabad	Currency: USD	
	Insurance: Customer Account	Generated by: Nikita	

Customer(Bill to): Hanmimedline

46-17 Dongnam-ro 49-gil Gangdong-gu Seoul Republic Of Korea

Post: 05366, South Korea Mobile: 82-10-9600-4888 Email: hanmivet@naver.com

Mr Luke Lee

Consingee(Ship to): Hanmimedline

46-17 Dongnam-ro $49\text{-}\mathrm{gil}$ Gangdong-gu Seoul Republic Of Korea

Post: 05366, South Korea Mobile: 82-10-9600-4888 Email: hanmivet@naver.com

Mr Luke Lee

Terms of Delivery: Goods in Ready Stock Terms of Payments: Advance 100 %

Terms & Conditions: DHL ACCOUNT NO.950835350

Sl No	Product Description	HSN	Qty	Unit	Rate	Disc(Per Unit)	Net Amount
1	SCH MB 100 Ophthalmic Strips Schirmer Tear Test SCH MB 100 CE marked box of 100 strips	90185090	100	Boxes	10.2000	0.0000	1020.00
2	FL 100 (CE) FL 100 CE Fluorescein Sodium 1mg USP 100 strips in a box 1 uze Ophthalmic Strips.	90185090	100	Boxes	8.0000	0.0000	800.00
3	FL 100 (CE) FL 100 CE Fluorescein Sodium 1mg USP 100 strips in a box 1 uze Ophthalmic Strips.	90185090	6	Boxes	0.0000	0.0000	0.00
Net Total							
Freight Charges						\$ 0.00	
Grand Total							\$ 1820.00

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. Please note, all banking charges shall be paid by the buyer.

Remit to:

Payment: 100% T/T(wire)

Bank Details for: (USD)

Beneficiary's Name :TARUN ENTERPRISESAccount No. :914020052016222Bank Name :AXIS BANK LTD

Bank Address: 28B CIVIL STATION MG MARG CIVIL LINES ALLAHABAD

SWIFT Code: AXISINBB286