

Order In Process

**Q-01300 / O-01070**

<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> O-01070			<b>Order Date:</b> December, 25, 2019	
			<b>Issued From:</b> Allahabad			<b>Currency:</b> INR	
			<b>Insurance:</b>			<b>Generated by:</b> Order Processing	
<b>Customer(Bill to):</b> <b>Cantrol Sample Allahabad</b> Civil Lines Allahabad, Uttar Pradesh 211001, India Mobile: 7275050650 Dr Cantrol Sample Ald			<b>Consingee(Ship to):</b> <b>Cantrol Sample Allahabad</b> Civil Lines Allahabad, Uttar Pradesh 211001, India Mobile: 7275050650 Dr Cantrol Sample Ald				
<b>Terms of Delivery:</b>			<b>Terms of Payments:</b>				
<b>Terms &amp; Conditions:</b>							
<b>Special instruction:</b>							
<b>S.N.</b>	<b>Product Description</b>	<b>HSN</b>	<b>Qty</b>	<b>Unit</b>	<b>Rate</b>	<b>Discount/Unit</b>	<b>Net Amount</b>
1	<b>Clear Visc 2ml Pfs (HV)</b>   Ophthalmic Solution   Clear Visc 2 ml Pfs, high viscosity   23g single use cannula.	30067000	11	Boxes	0.0000	0.0000	0.00
2	<b>Carbakol 1ml vial</b>   Ophthalmic Solution   Carbachol USP 0.01% w/v   box of 5	30042019	10	Boxes	0.0000	0.0000	0.00
3	<b>Carbakol 1ml vial (NC)</b>   Ophthalmic Solution   Carbakol UPS 0.01% w/v   box of   neutral code.	30042019	10	Boxes	0.0000	0.0000	0.00
<b>Net Total</b>							₹ 0.00
<b>Freight Charges</b>							₹ 0.00
<b>GST @ 0%</b>							₹ 0.00
<b>GST @ 12%</b>							₹ 0.00
<b>Grand Total</b>							₹ 0.00

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/payment.php](http://www.optitecheyecare.com/payment.php) .

Remit to:

**Payment :** 100% T/T(wire)  
**Beneficiary's Name :** testing  
**Bank Name :** test bank  
**Bank Address :** alld

Bank remittance charge shall be paid by payer(buyer)

**Bank Details for :** (INR)  
**Account No. :** 1234567  
**IFSC Code :** dkfjff

For Tarun Enterprises

Order Processing Team

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