

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

DISPATCH CHALLAN

Q2020211323 / O2020211365 / C2020211236

Bill to: The Eye And Mind Clinic Nagar Plaza 1st Floor Shop Number Landmark: Near Sbi Atm Rajroop Pur, Allahabad, India Mobile: 9560839628 Dr Shikha Yadav Challan No. C2020211236							Ship to: The Eye And Mind Clinic Nagar Plaza 1st Floor Shop Number Landmark: Near Sbi Atm Rajroop Pur, Allahabad, India Mobile: 9560839628 Dr Shikha Yadav				
		C2020211236 August, 31, 2020					Invoice No: Invoice Date:				
Customer Id:		848					Method Of		By Ha	nd	
Order No:		O2020211365					Date Of Sh	ipment:			
Sales	Person:	ChandreshSingh					Docket No:	:			
Dispa	tched From:	Allahabad					SB Number	r:			
Terms of Delivery :							Terms of Payments :				
Terms & Conditions :							Special Information :				
S.N.	Product Description	HSN	Unit	Qty	Rate	Ва	tch No	Mfg Dt./Exp Dt.		Discount/Unit	Net Amount
1	Size L Latex EGP Latex Examination Gloves Powdered Size L pack of 50	4015	Pkt	1	276.79	TE/LEGL/200801		08-2020/07-2025		26.79	250
Net Total											₹ 250
Freight Charges											₹ 0
GST @ 12%											₹ 30
Grand Total											₹ 280

Doc No. TE/F-7.5-07 For Tarun Enterprises | BANK AD CODE: 05100052900009 Prepared by Chandresh Singh| 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.