

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

Q2021220102 / O2021220106 / C2021220087

Bill to: Ship to:												
Nikhar Sagar D\'sign Studio						Nikhar Sagar D\'sign Studio						
18-a /1 Sardar Patel Marg						18-a /1 Sardar Patel Marg						
Civil Lines							Civil Lines					
Prayagraj, Uttar Pradesh							Prayagraj, Uttar Pradesh					
211001, India							211001, India					
Mobile: 9415317757, 9415317757							Mobile: 9415317757, 9415317757					
Email: nikharsagar@hotmail.com							Email: nikharsagar@hotmail.com					
Dr Nikhar Sagar						Dr Nikhar Sagar						
Challan No.		C2021220087					Invoice No:					
Challan Date.		April, 10, 2021				Invoice Date:						
Customer Id:		982					Method Of Shipment: By		Ву На	By Hand		
Order No:		O2021220106					Date Of Shipment:					
Sales Person:		ManojPandey					Docket No: Custo		omer			
Dispa	tched From:	Allahabad					SB Number:					
Terms of Delivery: By hand Customer							Terms of Payments : Advance					
Terms & Conditions :							Special Information :					
S.N.	Product Description	HSN-GST	Unit	Qty	Rate	Batch No		Mfg Dt./Exp Dt.		Discount/Unit	Net Amount	
1	Face Shield HeadGear OP-10 Face Shield HeadGear OP-10	65069900 18 %	Pcs	30	72.03	TE/OP10/20050		05-2020/04-2025		33.9	1144.07	
Net Total											₹ 1144.07	
Freight Charges											₹ 0	
GST @ 18%											₹ 205.93	
Grand Total											₹ 1350	

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



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