

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

000825

Exporter: TARUN ENTERPRISES	Quotation No: Q00825	Quotation Date: 24-09-2019					
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	Issued From: Allahabad Insurance: [] customer account	Currency: USD Generated by: Tarun Jaggi					
Customer(Bill to): Gene Medicals Sh. P. K. Njesa Depo Azem Galica P. N Prizren 20000, Kosovo, Republic of Email: efarmax@gmail.com Mr Edon	Consingee(Ship to):						
Terms of Delivery: [] normally in stock, depends on qty of order	Terms of Payments: [] adv	ance					
Terms & Conditions: [] freight cost as per actual							

Terms & Conditions: [] freight cost as per actual

Special instruction:

Special instruction:									
Sl No	Product Description	HSN	Qty	Unit	Rate	Disc(Per Unit)	Net Amount		
1	Opti Fl 10% Ophthalmic Solution Fluorescein Sodium Injection 10% box of 10 ampules of 5 ml each.	30063000	10	Boxes	10.0000	0.0000	100.00		
	\$ 100.00								
	\$ 0.00								
Grand Total									

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 ENTERPRISES **Account No. :** 914020052016222 **Bank Name :** AXIS BANK LTD

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

SWIFT Code: AXISINBB286