

TARUN ENTERPRISES

Terms of Payments: 100% Advance

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

Quotation / Performa Invoice

Q2020212412

Exporter: TARUN ENTERPRISES	Quotation No: Q2020212412	Quotation Date: February, 03, 2021				
H.O.: 8/8 Strachy Road, Allahabad - 211001, UP. INDIA Phone: +91 532 6590204 Email: info@optitecheyecare.com	Issued From: Allahabad	Currency: USD				
GST No: 09ACBPJ0823B1ZA Drug Licence: ALLD/5/21B/385,ALLD/5/20B/388 Dt. 06.05.2008	Insurance: Customer Account	Sales Person: Operations				
Customer(Bill to):	Consingee(Ship to):	Consingee(Ship to):				
Bam Korea	Bam Korea					
D 010 0 1 El CC0 II I l 1	Doom 212 2nd Floor 662	Room 213 2nd Floor 662 Hosoo-ro Llsandong-gu				
Room 213 2nd Floor 662 Hosoo-ro Llsandong-gu	K00111 213 2110 F1001 002	. Hosoo-ro Lisandong-gu				
Goyang City, Gyunggi-do	Goyang City, Gyunggi-do	5 5				
5 5		5 5				
Goyang City, Gyunggi-do	Goyang City, Gyunggi-do	5 5				
Goyang City, Gyunggi-do 10401, South Korea	Goyang City, Gyunggi-do 10401, South Korea					

Terms & Conditions: Fedex/DHL: Door to Door Delivery

Terms of Delivery: Goods ready in stock.

Special instruction: Freight charges pending for your previous shipment against Invoice no. E10,Dt: 08.06.2020, USD355,which we have already included in the freight charges.

Sl No	Product Description	HSN	Qty	Unit	Rate	Discount/Unit	Net Amount
	FL 100 (NON CE) Fluorescein Sodium Ophthalmic Strips USP Box of 100 NON CE	90185090	500	Boxes	11	0	5500
	SCH MB 100 (NON CE) Schirmer Tear Test Ophthalmic strip SCH MB 100 box of 100 strip Non CE	90185090	400	Boxes	13	0	5200
Net Total							\$ 10700
	Freight Charges						
Grand Total							\$ 11465

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.

Remit to:

Payment: 100% T/T(wire) **Bank Details for:** (USD)

111963700000179 Beneficiary's Name: Tarun Enterprises Account No.: Bank Name: Yes Bank Limited (USD) **SWIFT Code:** YESBINBBDEL

Bank Address: Yes Bank Limited, 17/15/1 Maharishi Dayanand Marg, Thornhill Road, Civil Lines, Allahabad 211001, UP,

India

Bank remittance charge shall be paid by payer(buyer)

For Tarun Enterprises



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

Quotation / Performa Invoice

Q2020212412

Note - This quotation is valid up to 20-03-2021 | Document created by - operations This is a computer-generated document. No signature is required.