

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

Q2020211911 / O2020212077 / C2020211919

Bill to:						Ship to:					
Diagramm Halbach Gmbh & Co. Kg						Diagramm Halbach Gmbh & Co. Kg					
Am Winkelstück 14 58239 Schwerte, Germany						Am Winkelstück 14 58239 Schwerte, Germany					
Mobile: 02304/759-966						Mobile: 02304/759-966					
Email: alina.blume@halbach.com						Email: alina.blume@halbach.com					
Miss Alina						Miss Alina					
Challa	n No.	C2020211919					Invoice No:				
Challan Date.		December, 10, 2020					Invoice Date:				
Customer Id:		487					Method Of Shipment: FEDE				
Order No:		O2020212077					Date Of Shipm	ient:			
Sales Person:		Order Processing					Docket No:				
Dispat	ched From:	Allahabad					SB Number:				
Terms of Delivery: Goods Ready in stock						Terms of Payments: 100% Advance					
Terms & Conditions: Freight customer account						Special Information :					
S.N.	Product Description	HSN	Unit	Qty	Rate	Batch No		Mfg Dt./Exp Dt.		Discount/Unit	Net Amount
1 T S	GCH MB 100 (NON CE) Schirmer Tear Test Ophthalmic strip GCH MB 100 box of 00 strip Non CE	90185090	Boxes	1	6	TE/SCH(MB)/2002		06-2020/05-2025		0	6
Net Total											€ 6
Freight Charges											€ 20
Grand Total											€ 26

Doc No. TE/F-7.5-07 For Tarun Enterprises | BANK AD CODE: 6470093

Prepared by Order Processing| Packed by

 $Remit \ to:$

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

Beneficiary's Name :Tarun EnterprisesAccount No. :62505001845Bank Name :Standard Chartered - Euro AccountSWIFT Code :SCBLINBBXXX

Bank Address: UR Hotel Building, 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.