

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

Q2020210841 / O2020210877 / C2020210800

Bill to:							Ship to:				
Cash					Dr. Raaj						
Tarun Enterprises						Allahabad					
Civil Line											
Allahabad, India											
Mobile: 8176080204											
Dr Cash							,				
Chall	an No.	C2020210800					Invoice No:				
Challan Date.		July, 06, 2020					Invoice Date:				
Customer Id:		829					Method Of Shipment: By Hand				
Order No:		O2020210877					Date Of Sh	ipment:			
Sales Person:		Order Processing					Docket No:				
Dispa	tched From:	Allahabad					SB Number	r:			
Terms of Delivery: By Hand Staff						Terms of Payments: CASH ON DELIVERY					
Terms & Conditions: Order on Visit							Special Information :				
S.N.	Product Description	n HSN	Unit	Qty	Rate	Batch 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/LE	GL/200701	07-2020/06-2025		26.79	250
2	Face Shield OP-9		Pcs	1	101.69	TE/OP09/200501		05-2020/04-2025		33.9	67.8
Net Total											₹ 317.8
Freight Charges											₹ 0
GST @ 12%											₹ 30
GST @ 18%											₹ 12.2
Grand Total											₹ 360

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

Prepared by Order Processing| 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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