

### Quotation / Performa Invoice

**Q2020211063**

<b>Exporter:</b> <b>TARUN ENTERPRISES</b> 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	<b>Quotation No:</b> Q2020211063	<b>Quotation Date:</b> July, 29, 2020
	<b>Issued From:</b> Allahabad	<b>Currency:</b> INR
	<b>Insurance:</b> Insurance Charges extra, as per actuals, to be borne by the customer.	<b>Sales Person:</b> Care

<b>Customer(Bill to):</b> <b>M &amp; M Health Care Solutions</b> 17/377 Kodathipadi Mannarkkad Palakkad, Kerala 678582, India Mobile: 9061578273, 9061578274 Email: mandmhealthcaresolutions@gmail.com Mr Pramod Melethil GST No.: 32CSNPM3393K1Z9	<b>Consignee(Ship to):</b> <b>M &amp; M Health Care Solutions</b> 17/377 Kodathipadi Mannarkkad Palakkad, Kerala 678582, India Mobile: 9061578273, 9061578274 Email: mandmhealthcaresolutions@gmail.com Mr Pramod Melethil GST No.: 32CSNPM3393K1Z9
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<b>Terms of Delivery:</b> Against Purchase Order	<b>Terms of Payments:</b> 100% Advance Payment
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**Terms & Conditions:** Freight Charges Extra to be borne by the customer as per actuals includes - Door to Door  
Delivery: DHL/FedEx

**Special instruction:** Bank Charges, Bills & Duties extra, as per actuals, to be borne by the customer.

Sl No	Product Description	HSN-GST	MRP	Qty	Unit	Rate	Discount/Unit	Net Amount
1	<b>Gloves Nitrile L 100</b>   Nitrile Examination Gloves Powdered Free   Size L   Pack of 100	4015 12 %	1250.00	300	Boxes	1116.07	625	147321.43
2	<b>Size L Latex EGP</b>   Latex Examination Gloves Powdered   Size L   pack of 50	4015 12 %	310.00	300	Pkt	276.79	98.21	53571.43
<b>Net Total</b>								₹ 200892.86
<b>Freight Charges</b>								₹ 0
<b>GST @ 12%</b>								₹ 24107.14
<b>Grand Total</b>								₹ 225000

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)

**Beneficiary's Name :** Tarun Enterprises

**Bank Name :** Standard Chartered Bank (Rupee)

**Bank Address :** Hotel UR Complex, 7/3 A/1 MG Marg, Civil Lines, Allahabad 211001, UP, India

**Bank Details for :** (INR)

**Account No. :** 62505001845

**IFSC Code :** SCBL0036044

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**Bank remittance charge shall be paid by payer(buyer)**

For Tarun Enterprises

Note - This quotation is valid up to 13-08-2020 | Document created by - Care  
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