

Proforma Invoice

Seller (Name, Address): Gravity Pharma General Trading LLC. Office No.506, 5th Floor, Fairmont Dubai Sheikh Zayed Road Dubai UAE P.O.Box:340764-Dubai Tel: +97142944745, Fax: +97142944746		P.Invoice Number:				
		PSTLEG723		Validity Date of Invoice		
		Invoice Date: 10/07/2023		2 Years		
Seller's License No. 734621		Buyers Reg. NO: 10320863820				
Consignee (Name, Address): Pak Salamat Tamin Co. No.56, Alvand St., Argentina Sq. Tehran, Iran Tel: +98 21 88793989 Fax: +98 21 88202856		Buyer (Name, Address): Pak Salamat Tamin Co. No.56, Alvand St., Argentina Sq. Tehran, Iran Tel: +98 21 88793989 Fax: +98 21 88202856				
Partial Shipment: <input type="checkbox"/> Not allowed <input checked="" type="checkbox"/> Allowed		Country of Beneficiary United Arab Emirates Country of Origin USA Place of Destination IRAN Terms of delivery relevant location: Tehran-Iran CPT				
Transport mode and means: Air/ Track/ Sea	Port/Airport of loading	Terms of Payment TT Advance		Transaction Currency Euro		
Port/Airport of discharge Imam Khomeini International Airport (IKA), Tehran custom,shahriar, Bandar Abbas	Final Delivery Place Tehran-Iran(Tehran custom,shahriar custom,IKA), Bandar Abbas					
item	Item Descriptions	Quantity / KG	BRAND	Unit Price/KG (Euro)	Total Amount (Euro)	
1	PREMIX LEG DAY (CHERRY LIMEAD) HS: 29021900	3,248 KG		49.00	159,152.00	
				Sub Total Amount :159,152.00		
				Freight Charges : 9,450.00		
				Total: 168,602.00 \$		
Banking Details: Beneficiary Name: Gravity Pharma General Trading LLC. /Bank Name: Habib Bank Limited (HBL)/Branch: Dubai, Address: Al Abbas Building Ground Floor Khalid Bin Al Waleed Road,Bur Dubai,Dubai,UAE//AED: Account: 20127772089503(AED) IBAN NO.:AE020280020127772089503 SWIFT: HABBAEAD Account: 20127772149703(EUR) IBAN NO.:AE310280020127772149703 SWIFT: HABBAEAD		Signatory Place and Date of Invoice Seal and Signature				



Gravity Pharma General Trading LLC

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