

# PROFORMA INVOICE

**Buyer/Consignee Name & Address:**

M/S: JV "Dutchmed-M" S.R.L.  
76, Decebal Avenue MD-2038, Chisinau / Republic of Moldova

PROFORMA INVOICE NO. ELM 20220926

DATE OF ISSUE: 26.09.2022

SL. NO.	DESCRIPTION OF GOODS	ORDERED QUANTITY	UNIT PRICE	AMOUNT
01	LIFETIME" SURGICAL ASPIRATOR SA-01 HOSPITAL MODEL (Standard) 2x5L jar	6	\$480,00	\$2.880,00
02	HYDROPHOBIC FILTER (HT01M023)	90	\$3,00	\$270,00
<b>OTHER TERMS AND CONDITIONS</b>		<b>SUB TOTAL</b>		\$3.150,00
Origin of The Goods: Republic of Turkey		<b>Freight &amp; Handling Charges</b>		\$585,00
Delivery: DAP MOLDOVA		<b>GRAND TOTAL</b>		<b>\$3.735,00</b>
Shipment: 5 to 7 days after the payment		<b>TOTAL PAYABLE AMOUNT:</b> Three Thousand Seven Hundred Thirty Five US Dollars Only		
Payment: 100% Bank TT in advance				
MODE OF PACKING: EXPORT WORTHY CARTON BOXES ON PALLETS				
<b>INSURANCE WILL BE COVERED BY BUYER</b>				
<b>BENEFICIARY BANK DETAILS:</b> NAME OF BENEFICIARY: ELMASLAR İMALAT TIBBİ CIHAZLAR İNŞ. TAŞ. İTH. İHR. SAN. VE TİC. A.Ş. BANK NAME: T.C. ZIRAAT BANKASI A.S. BRANCH NAME: ASO 1.OSB BRANCH, SINCAN / ANKARA IBAN NO:TR87 0001 0019 2960 4817 9350 03 SWIFT CODE: TCZBTR2A <b>Special Term:</b> All expanses of remittance/advising/ reimbursement bank charges outside Turkey are in Applicant's account.				