TAX INVOICE Original

MILIMAX HEALTHCARE PVT. LTD.

1 ST FLOOR TALIN TOWER NR BUBBER SONS MENDWAS HOUSE NEHRU BAZAR JAIPUR-302001

Phone: 0141-4911428 Mobile: 9928954400 Email: MILIMAXHEALTH@GMAIL.COM

PAN No. CIN No. **U24299RJ2020PTC072410** FSSAI No. **20240426105916789**

GSTIN No. **08AAOCM0957D12C** D.L. NO **2020-21/53060/53061**

Buyer Invoice No. DS/24-25/781 Date 05/08/2024

SHYAM KRIPA MEDICAL Invoice Type CASH MEMO Due Date 15/08/2024

SHOP NO D AND E PLOT NO 27

VISHVESHWAIRYAN NAGAR

Order No.:

Despatch By

 JAIPUR-302015
 G.R.No. :
 Dated

 Rajasthan
 Code. 08
 Eway Bill No. :
 Cases :

GSTIN No. Freight:

D.L.No. **DRUG-2023/24-94948**

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	MONTY-L	300490	LGN02/163/64	01/26	100	1*10	110.00	11.50	0.00	12.00	1150.00
2	ZEO- D3 MAX SOFT GEL CAP	300450	D240990F	03/26	100	1*10	210.00	21.00	0.00	12.00	2100.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value	Basic Amount Sale Return	3250.00 0.00
300490	CGST 6.0%+SGST 6.0%	1,150.00	69.00	69.00	Total Discount	0.00
300450	CGST 6.0%+SGST 6.0%	2,100.00	126.00	126.00	Oth.Charges Amt	0.00
					CGST TAX	195.00
					SGST TAX	195.00
					Net Amount	3640.00

Net Amount Payable (In Words):

Rupees Three Thousand Six Hundred Forty Only.

Bank Details:

HDFC BANK LTD, KISHANPOLE BAZAR JAIPUR

A/C NO:50200052640132 RTGS/NEFT, IFSC CODE - HDFC0003630

1.GOODS ONCE SOLD WILL NOT BE TAKEN BACK.
2.ALL THE GOODS DESPATCHED AT PURCHASER'S RISK.
3.OUR RESPONSIBILITY CEASES AS SOON AS GOODS LEAVE OUR PRIMESIS.
4.INTEREST WILL BE CHARGED 24%PER ANNUM.
5.ALL DESPUTES SUBJECT TO JAIPUR JURISDICTION ONLY.

For MILIMAX HEALTHCARE PVT. LTD.

Authorised Signatory