TAX INVOICE Original

Due Date

## 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

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

GSTIN No. 08AAOCM0957D1ZC D.L. NO 2020-21/53060/53061

29/06/2024 Buyer Invoice No. DS/24-25/567 Date 09/07/2024

**CREDIT MEMO** Invoice Type **PRITAM PHARMACEUTICALS** Order No.: **CHOURA RASTA** 

Despatch By

**JAIPUR-302001** G.R.No.: 2567429 Dated Rajasthan Code. 08 Eway Bill No.: Cases:

GSTIN No. **08AANPJ9328B1ZM** PAN No. AANPJ9328B Freight:

D.L.No. 24760

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	CYTRI SYP.	300490	A-240115	06/25	72	200ML	125.00	20.00	0.00	12.00	1440.00
2	CITO-PLUS	300490	T0823495	07/25	50	1*10	115.00	12.00	0.00	12.00	600.00
		1		1				D:- A	- · · · - L		2040.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value	Basic Amount Sale Return	2040 (
300490	CGST 6.0%+SGST 6.0%	2,040.00	122.40	122.40	Total Discount	(
					Oth.Charges Amt	C
					CGST TAX	122
					SGST TAX	122
					Net Amount	2285

Net Amount Payable (In Words ):

Rupees Two Thousand Two Hundred Eighty Five Only.

Bank Details:

HDFC BANK LTD, KISHANPOLE BAZAR JAIPUR

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

Terms: For MILIMAX HEALTHCARE PVT. LTD. 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. **Authorised Signatory 5.ALL DESPUTES SUBJECT TO JAIPUR JURISDICTION ONLY.**