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

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

GSTIN No. 08AAOCM0957D1ZC

D.L. NO 2020-21/53060/53061

DS/24-25/800 Invoice No. **CREDIT MEMO** Invoice Type

Date

07/08/2024

GOVIND PHARMA

Order No.:

Due Date

17/08/2024

SONA MARKET, SARAIA GANJ. OPPBABA JI

Despatch By

MA ANNAPURNA TRANSPORT

BARTAN WALA MUZAFFARPUR-842001

G.R.No.:

Dated

Bihar

Buyer

Code. 10

Eway Bill No.:

GSTIN No. 10AUIPK8473D1ZS

PAN No. AUIPK8473D

Cases:

D.L.No. 21/21A Freight:

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	PICOFIN TAB	300490	GTM23274	07/25	300	1*10	55.00	5.50	0.00	12.00	1650.00
2	CLINDASCAN-300	382200	GCM24013	01/26	150	1*10	297.78	41.50	0.00	5.00	6225.00
3	COLLASHELL	210690	MT-0134	10/25	100	1*10	250.00	42.00	0.00	18.00	4200.00
4	VISPRO HP - KIT	300410	LBN05K018/10	04/26	100	1*6	219.30	45.00	0.00	12.00	4500.00
5	FORWARDING 996791	996791					0.00	700.00	0.00	18.00	700.00

HSN Code	Tax Description	Assessable	IGST		Basic Amount		
	'	Value	Value		Sale Return		
300490	IGST 12.0%	1,650.00	198.00		Total Discount		
382200	IGST 5.0%	6,225.00	311.25		Oth.Charges Amt IGST TAX		
210690	IGST 18.0%	4,200.00	756.00				
300410	IGST 12.0%	4,500.00	540.00				
996791	IGST 18.0%	700.00	126.00				

1,931.25 Net Amount 19206.00

17275.00 0.00 0.00 0.00

Net Amount Payable (In Words):

Rupees Nineteen Thousand Two Hundred Six Only.

Bank Details:

HDFC BANK LTD, KISHANPOLE BAZAR JAIPUR

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

Terms:

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**

4.INTEREST WILL BE CHARGED 24%PER ANNUM.

5.ALL DESPUTES SUBJECT TO JAIPUR JURISDICTION ONLY.

For MILIMAX HEALTHCARE PVT. LTD.

Authorised Signatory

PRIMESIS.