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

Buyer Invoice No. **DS/24-25/1678** Date 13/12/2024 **CREDIT MEMO** Invoice Type

POONAM MEDICAL AND GENERAL PROVISION **OPP C 2 PLAZA MALVIYA NAGAR**

Code. 08

Order No.:

Despatch By

23/12/2024 Due Date

Cases:

Dated

G.R.No.: Eway Bill No.:

Freight:

Rajasthan GSTIN No.

JAIPUR-

D.L.No. JPR 2011/22263

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	METOCLAV -625 LB	300410	LBN04/008/11	09/25	100	1*6	145.00	46.80	0.00	12.00	4680.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value	Basic Amount Sale Return	4680.00 0.00
300410	CGST 6.0%+SGST 6.0%	4,680.00	280.80	280.80	Total Discount	0.00
					Oth.Charges Amt	0.00
					CGST TAX	280.80
					SGST TAX	280.80
					Net Amount	5242.00

Net Amount Payable (In Words):

Rupees Five Thousand Two Hundred Forty Two 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.**