TAX INVOICE Original

Due Date

13/12/2024

## 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/24-25/1602** Date 03/12/2024 **Buyer** Invoice No. **CREDIT MEMO** Invoice Type

Order No.: **BBB 3 2 ND FLOOR DOONI HOUSE FILM** 

Despatch By **COLONY JAIPUR** 

**JAIPUR-302001** G.R.No.: Dated

Rajasthan Code. 08 Eway Bill No.: Cases:

GSTIN No. 08DENPM4736P1ZL PAN No. DENPM4736P Freight: D.L.No. N-5651

	1										
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	FLUTISCAN-F	300490	OPMD054	01/26	50	10 ML	425.00	68.00	0.00	12.00	3400.00
I				1							

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value		Basic Amount Sale Return	340
30049099	CGST 6.0%+SGST 6.0%	3,400.00	204.00	204.00		Total Discount	
						Oth.Charges Amt	
						CGST TAX	20
						SGST TAX	20
						Net Amount	380

Net Amount Payable (In Words ):

Rupees Three Thousand Eight Hundred Eight Only.

Bank Details:

**MANAN PHARMA** 

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.**