TAX INVOICE Original

Net Amount

1411.00

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

30/07/2024 Buyer Invoice No. DS/24-25/744 Date 09/08/2024

CREDIT MEMO Invoice Type **GOVIND PHARMA** Due Date Order No.:

SONA MARKET, SARAIA GANJ. OPPBABA JI **MA ANNAPURNA TRANSPORT** Despatch By **BARTAN WALA**

MUZAFFARPUR-842001 G.R.No.: Dated

Bihar Code. 10 Eway Bill No.: Cases:

GSTIN No. 10AUIPK8473D1ZS PAN No. AUIPK8473D Freight:

D.L.No. 21/21A

SNo	Descri	otion Of Goods	HSN	Batch No	Exp	. Qty	Pack.	MRP	Rate	Disc. %	GST	Amount	
1 2	MEDITR		300490 996791	AKT10040			1*10	27.77 0.00	4.40 110.00		12.00	1144.00 110.00	
HSN Code				ssessable alue		IGST Value			Basic Amount Sale Return		1254.00 0.00		
)490			1,144.00		137.28			Total Discount			0.00	
996	5791	IGST 18.0%		110.00		19.80			Oth.Charges Amt			0.00	
									IGST TAX			157.08	
							J						

Net Amount Payable (In Words):

Rupees One Thousand Four Hundred Eleven 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.**