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

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

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

Buyer Invoice No. DS/24-25/255 Date 09/05/2024

A S PHARMA Invoice Type CREDIT MEMO Due Date 19/05/2024

MADWA NAGAR BADEBAN BLOCKROAD Order No. :

Despatch By

BASTI- G.R.No. : Dated

Uttar Pradesh Code. 09 Eway Bill No. : Cases :
GSTIN No. 09BKTPS5975G1Z4 PAN No. BKTPS5975G

Freight :

D.L.No. **45/NB/WS/BST/2012**

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	FLORAMET CAP	210690	SC-2703	05/25	20	1*10	85.00	15.00	0.00	18.00	300.00
2	FLORAMET CAP	210690	MC-0009	06/25	180	1*10	85.00	15.00	0.00	18.00	2700.00
3	ZEO- D3 MAX SOFT GEL CAP	300450	D240423F	01/26	100	1*10	210.00	22.00	0.00	12.00	2200.00
4	FORWARDING 996791	996791					0.00	330.00	0.00	18.00	330.00

Net Amount **6393.00**

Net Amount Payable (In Words):

Rupees Six Thousand Three Hundred Ninety Three Only.

Bank Details:

HDFC BANK LTD, KISHANPOLE BAZAR JAIPUR

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

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.
5.ALL DESPUTES SUBJECT TO JAIPUR JURISDICTION ONLY.

FOR MILIMAX HEALTHCARE PVT. LTD.

Authorised Signatory