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

01/07/2024 Buyer Invoice No. DS/24-25/575 Date **CREDIT MEMO** Invoice Type 11/07/2024 Due Date

ALPINE HEALTH CARE SHOP NO 2 PLOT NO 60, NAHRI

Order No.: Despatch By KANAKA, SHASTRI NAGAR

G.R.No.: **JAIPUR-**Dated Rajasthan Code. 08 Eway Bill No.: Cases:

GSTIN No. **08ALHPA1536F1ZK** PAN No. ALHPA1536F Freight:

D.L.No. JPR-2013/25763

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	PREGALIFE	300450	CE240048	04/26	500	10*10	110.00	12.50	0.00	12.00	6250.00
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HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value	Basic Amount Sale Return	6250.00 0.00
300450	CGST 6.0%+SGST 6.0%	6,250.00	375.00	375.00	Total Discount	0.00
					Oth.Charges Amt	0.00
					CGST TAX	375.00
					SGST TAX	375.00
					Net Amount	7000.00

Net Amount Payable (In Words):

Rupees Seven Thousand 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.**