

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. **12221026000745**GSTIN No. **08AAOCM0957D1ZC**D.L. NO **2020-21/53060/53061**

Buyer

OVATION INTERNATIONAL**B-24- B-1 PRABHU MARG****TILAK NAGAR****JAIPUR-302004****Rajasthan**

Code. 08

GSTIN No. **08AAKPN5967B1ZG** PAN No. **AAKPN5967B**D.L.No. **DRUG -2021-22/55117**

Invoice No.

DS/23-24/2039

Date

12/03/2024

Invoice Type

CREDIT MEMO

Due Date

22/03/2024

Order No. :

Despatch By

G.R.No. :

Dated

Eway Bill No. :

Cases :

Freight :

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	AMALIN VIAL	300490	24EA18C	12/25	35	10 ML	75.00	12.50	0.00	12.00	437.50

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
300490	CGST 6.0%+SGST 6.0%	437.50	26.25	26.25

Basic Amount	437.50
Sale Return	0.00
Total Discount	0.00
Oth.Charges Amt	0.00
CGST TAX	26.25
SGST TAX	26.25
Net Amount	490.00

Net Amount Payable (In Words):

Rupees Four Hundred Ninety Only.Bank Details :**HDFC BANK LTD,KISHANPOLE BAZAR JAIPUR****A/C NO:50200052640132 RTGS/NEFT , IFSC CODE - HDFC0003630**Terms :

- 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