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 Invoice No. **DS/23-24/2018** Date **08/03/2024** 

NEELKANTH PHARMA Invoice Type CREDIT MEMO Due Date 18/03/2024

NEAR TAHSIL, ALWAR ROADKISHANGARH

Order No.:

Despatch By

KISHANGARH BAS-SONI G.R.No. : Dated

Rajasthan Code. 08 Eway Bill No. : Cases :
GSTIN No. 08DPCPK8048J1ZI PAN No. DPCPK8048J

Freight :

D.L.No. /535											
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	FLUMET -150	300490	FM15T502	11/25	480	1*1	13.50	3.50	0.00	12.00	1680.00
2	PRADO-40 IV INJ.	300490	24GA15E	12/25	150	VIAL	55.00	12.50	0.00	12.00	1875.00
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HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
300490	CGST 6.0%+SGST 6.0%	1,680.00	100.80	100.80
30049039	CGST 6.0%+SGST 6.0%	1,875.00	112.50	112.50

Net Amount Payable (In Words ):

Rupees Three Thousand Nine Hundred Eighty Two 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