TAX INVOICE Original

Net Amount

5130.00

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

22/08/2024 Buyer Invoice No. DS/24-25/882 Date 01/09/2024

CREDIT MEMO Invoice Type SHYAM KRIPA MEDICAL Due Date Order No.: **SHOP NO D AND E PLOT NO 27**

Despatch By **VISHVESHWAIRYAN NAGAR**

JAIPUR-302015 G.R.No.: Dated Rajasthan Code. 08 Eway Bill No.: Cases:

GSTIN No. Freight: DRUG-2023/24-94948

	SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
Ī	1	RYTUS-D	300490	A-240317	02/26	160	100ML	125.00	15.50	0.00	12.00	2480.00
	2	ZEO- D3 MAX SOFT GEL CAP	300450	D241790A	06/26	100	1*10	210.00	21.00	0.00	12.00	2100.00

HS	N Code	Tax Description		Assessable Value	CGS ⁻ Valu		SGST Value		Basic Amount Sale Return		4580.00 0.00
	00490	CGST 6.0%+SGST 6		2,480.00	148.80		148.80		Total Dis	count	0.00
300	0450	CGST 6.0%+SGST 6	.0%	2,100.00	12	6.00	126.00	26.00	Oth.Chai	ges Amt	0.00
									CGST TA	Х	274.80
									SGST TA	Х	274.80

Net Amount Payable (In Words):

Rupees Five Thousand One Hundred Thirty Only.

Bank Details:

D.L.No.

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.**