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/24-25/1086 Date 17/09/2024 VINAYAK MEDICOS Invoice Type CREDIT MEMO Due Date 27/09/2024

NE. NEEM KA THANA ROAD WARD NO 14 Order No. :

THOI, SIKAR Despatch By

SIKAR- G.R.No. : Dated

Rajasthan Code. 08 Eway Bill No. : Cases :
GSTIN No. 08EDJPG1204C1Z6 PAN No. EDJPG1204C

D.L.No. **DRUG-2023/2024-106450** Freight:

D.L.	D.L.No. DR0G-2025/2024-100450										
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	PLATOMIL SYP.	300490	ML-0087	08/27	120	200 M	235.00	21.50	0.00	12.00	2580.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
300490	CGST 6.0%+SGST 6.0%	2,580.00	154.80	154.80

Net Amount Payable (In Words):

Rupees Two Thousand Eight Hundred Ninety 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