TAX INVOICE Original

Due Date

## 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. **12221026000745** 

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

29/02/2024 Buyer Invoice No. **DS/23-24/1968** Date **CREDIT MEMO** Invoice Type **MANAN PHARMA** 10/03/2024

Order No.: **BBB 3 2 ND FLOOR DOONI HOUSE FILM** 

Despatch By **COLONY JAIPUR** 

G.R.No.: **JAIPUR-302001** Dated

Rajasthan Code. 08 Eway Bill No.: Cases:

GSTIN No. 08DENPM4736P1ZL PAN No. DENPM4736P Freight: D.L.No. N-5651

D.L	D.L.NO. 14 3031										
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	RISOL-GEL	300490	A-231009	03/25	480	170ML	125.00	15.25	0.00	12.00	7320.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
300490	CGST 6.0%+SGST 6.0%	7,320.00	439.20	439.20

Net Amount Payable (In Words ):

Rupees Eight Thousand One Hundred Ninety Eight 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.**