TAX INVOICE Original

12/12/2024

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

DS/24-25/1595 Date 02/12/2024 Buyer Invoice No. **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

D.L.No.

SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	ZEO- D3 MAX SOFT GEL CAP	300450	D242328A	08/26	150	1*10	210.00	21.00	0.00	12.00	3150.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
300450	CGST 6.0%+SGST 6.0%	3,150.00	189.00	189.00

Net Amount Payable (In Words):

Rupees Three Thousand Five Hundred Twenty 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.**