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

CIN No. **U24299RJ2020PTC072410** PAN No. FSSAI No. **20240426105916789**

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

04/02/2025 Buyer Invoice No. **DS/24-25/1971** Date

Despatch By

Freight:

MANAN PHARMA

BBB 3 2 ND FLOOR DOONI HOUSE FILM COLONY JAIPUR

JAIPUR-302001

Rajasthan Code. 08

GSTIN No. 08DENPM4736P1ZL PAN No. DENPM4736P

D.L.No. N-5651

CREDIT MEMO Invoice Type

Order No.:

Due Date 14/02/2025

G.R.No.: Dated

Eway Bill No.: Cases:

- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -											
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	RISOL-GEL	300490	A-241105	05/26	192	170ML	125.00	15.25	0.00	12.00	2928.00
		1		1	1						

	ll						
HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value		Basic Amount Sale Return	2928.00 0.00
300490	CGST 6.0%+SGST 6.0%	2,928.00	175.68	175.68		Total Discount	0.00
						Oth.Charges Amt	0.00
						CGST TAX	175.68
						SGST TAX	175.68
						Net Amount	3279.00

Net Amount Payable (In Words):

Rupees Three Thousand Two Hundred Seventy Nine 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.**