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/24-25/2297 Date 24/03/2025
SUMIT PHARMA. Invoice Type CREDIT MEMO Due Date 24/03/2025

Order No. :

Despatch By

JAIPUR-303301 G.R.No. : Dated

Rajasthan Code. 08 Eway Bill No. : Cases :

GSTIN No. **08AHRPJ0248H1Z7** PAN No. **AHRPJ0248H** Freight:

D.L.No. **DRUG 200/21-36221**

SSO.ID DROGOFF/2018

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SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	RUBICOF-LS	300490	A-250111	12/26	160	100ML	120.00	16.50	0.00	12.00	2640.00
2	RUBICOF SYP.	300490	A-240107	12/26	80	1*100	105.00	15.00	0.00	12.00	1200.00

HSN Code	Tax Description	Assessable	CGST	SGST
		Value	Value	Value
00490	CGST 6.0%+SGST 6.0%	3,840.00	230.40	230.40

Net Amount Payable (In Words):

Rupees Four Thousand Three Hundred One 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