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. **20240426105916789** 

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

Buyer Invoice No. **DS/24-25/1937** Date 30/01/2025 **CREDIT MEMO** Invoice Type 09/02/2025

**UDIUS HEALTH CARE.** Order No.: **CHUNGI NAKA NO 2** 

**MOHIT TRANSPORT COMPANY** Despatch By **UDAIPUR WATI ROAD, KHANDELA** 

G.R.No.: SIKAR-332709 Dated Rajasthan Code. 08

Eway Bill No.: Cases: GSTIN No. **08FPVPS4973H1ZS** PAN No. FPVPS4973H

Freight: DRUG/2024-25/119391 D.L.No.

D.L.	110. 21.00, 2021 20, 220										
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	NUMENFIT CAP.	3004	D243126C	11/26	1800	1*10	300.00	39.50	0.00	12.00	71100.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
3004	CGST 6.0%+SGST 6.0%	71,100.00	4,266.00	4,266.00

Net Amount Payable (In Words ):

Rupees Seventy Nine Thousand Six Hundred Thirty Two 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.**