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

07/02/2025 Buyer Invoice No. DS/24-25/1997 Date

**CREDIT MEMO** Invoice Type **UNIQUE ASSOCIATES** 17/02/2025 Due Date

Order No.:

9 1ST FLOOR PHARM PLAZAFIML COLONY Despatch By **JAIPUR** 

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

Rajasthan Code. 08 Eway Bill No.: Cases: GSTIN No. **08AAYPK1349J1Z4** PAN No. AAYPK1349J

Freight: D.L.No. 14919

D.L.											
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	MELIDE-TH	300490	LGN02/172/09	01/26	50	1*10	160.00	35.00	0.00	12.00	1750.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value	Basic Amount Sale Return	1750. 0.
300490	CGST 6.0%+SGST 6.0%	1,750.00	105.00	105.00	Total Discount	0.
					Oth.Charges Amt	0.
					CGST TAX	105.
					SGST TAX	105.
					Net Amount	1960.

Net Amount Payable (In Words ):

Rupees One Thousand Nine Hundred Sixty 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.**