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/24-25/2070 Date 17/02/2025
OMEX PHARMA Invoice Type CREDIT MEMO Due Date 27/02/2025

G-6, SHUBHAM TOWER, PLOT NO-3 NR . Order No. :

GOYAL HOSPITAL SHASTRI NAGAR Despatch By

**JAIPUR-302016** G.R.No. : Dated

Rajasthan Code. 08 Eway Bill No. : Cases :
GSTIN No. 08BPGPS9725A1ZP PAN No. BPGPS9725A

D.L.No. **JPR05/11099** Freight:

D.L.	.No. 31 R03/ 11033										
SNo	Description Of Goods	HSN	Batch No	Exp.	Qty	Pack.	MRP	Rate	Disc. %	GST	Amount
1	NEUROMAX-1200	300490	24H-T1745	10/26	100	1*10	285.00	55.00	0.00	12.00	5500.00

HSN Code	Tax Description	Assessable Value	CGST Value	SGST Value
300490	CGST 6.0%+SGST 6.0%	5,500.00	330.00	330.00

Net Amount Payable (In Words ):

Rupees Six Thousand One Hundred Sixty 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