

GSTIN : 07CDLPD3827N2Z6

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# TAX INVOICE Switchmeds

604, Suneja Tower-2, District Center,, Janakpuri, Delhi  
Tel. : 9999428970 email : switchmeds@gmail.com

Drug Licence No. : DL-JNK-145663

DL NO. DL-JNK-145663

Invoice No. : 3011/2024-25  
Dated : 15-11-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport :

Vehicle No. :  
Station :  
P.O No. : 195-112024-28544  
P.O Date : 07-11-2024  
DRUG LIC NO :

**Billed to :**

DCDC Health Services Private Limited  
C-185, First Floor  
Rewari Line Industrial Area  
Mayapuri, Phase-II, Delhi, 110064

Party Mobile No :  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :

**Shipped to :**

DCDC Health Services Private Limited  
TH Byadgi  
Government General Hospital  
Agasanhalli Road,Byadgi-581106

Party Mobile No : 6361259951  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) L1182445D	30019091	50.00	Pcs.	115.00	5,750.00
2.	SODIUM HYPO 10% (5 LTR) AD12672	28289019	6.00	LTR	180.00	1,080.00
Add : CGST @ 6.00 %						345.00
Add : SGST @ 6.00 %						345.00
Add : CGST @ 9.00 %						97.20
Add : SGST @ 9.00 %						97.20
Add : Freight & Forwarding Charges						800.00
<b>Grand Total</b>					<b>56.00 Units</b>	<b>₹ 8,514.40</b>

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	1,080.00	97.20	97.20	194.40
30019091	12%	5,750.00	345.00	345.00	690.00
<b>Total</b>		<b>6,830.00</b>	<b>442.20</b>	<b>442.20</b>	<b>884.40</b>

Stock/No. of Boxes Received ..... 04 .....  
Subject to Physical Check  
Name/Employee Code ..... DC034892 .....  
Centre Name ..... Byadgi .....  
Date/Time ..... 22/11/24 6.00 .....  
Signature ..... [Signature] ..... M. No. 636125995

**Rupees Eight Thousand Five Hundred Fourteen and Paise Forty Only**

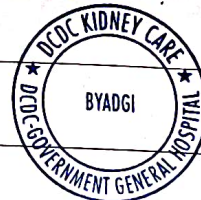
**Bank Details :** A/C NAME: SWITCH MEDS BANK NAME: AXIS BANK  
A/C NO. 921020027370029 IFSC CODE: UTIB0001102

**Terms & Conditions**

E.& O.E.

- Goods once sold will not be taken back.
- Interest @ 18% p.a. will be charged if the payment is not made with in the stipulated time.
- Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :



for Switchmeds

Authorised Signatory