

SWITCH MEDS

711-VISHWA SADAN DISTRICT CENTRE JANAKPURI NEW DELHI-110058

Phone no. : 9999428970

Email : SWITCHMEDS@GMAIL.COM

GSTIN : 07CDLPD3827N2Z6

State: 07-Delhi

Tax Invoice

Bill To

DCDC HEALTH SERVICE PVT LTD

First Floor C-185 Rewari Line
Industrial Area Mayapuri, Phase-II

GSTIN : 07AAFCD0204K1Z1

State: 07-Delhi

Ship To

DCDC Health Service Pvt. Ltd. @

Ambedkar Nagar Combined

Hospital

Akbarpur, Ambedkar Nagar, Uttar

pradesh- 224122.,

224122

Place of supply: 07-Delhi

Invoice No.: 733

Date : 27-05-2023

PO Date : 19-05-2023

PO Number : fa-72-052023-22734-

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#	Item name	HSN/ SAC	Quantity	Price/ Unit	GST	Amount
1	BP INSTRUMENT	9018	4	₹ 1,600.00	₹ 768.00 (12%)	₹ 7,168.00
Total			4		₹ 768.00	₹ 7,168.00

Invoice Amount In Words

Seven Thousand One Hundred Sixty Eight Rupees
only

Terms and Conditions

Thanks for doing business with us!

Sub Total	₹ 6,400.00
SGST@6%	₹ 384.00
CGST@6%	₹ 384.00
Total	₹ 7,168.00
Received	₹ 0.00
Balance	₹ 7,168.00



UPI SCAN TO PAY

Pay To-

Bank Name : AXIS BANK,
MOTI NAGAR, NEW
DELHI

Bank Account No. :
921020027370029

Bank IFSC code :
UTIB0001102

Account holder's name :
SWITCHMEDS

For, : SWITCH MEDS

Authorized Signatory

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature M. No.