

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. : 2460/2024-25	Vehicle No. :
Dated : 16-08-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 143-082024-26991
Reverse Charge : N	P.O Date : 05-08-2024
GR/RR No. :	DRUG LIC NO :
Transport :	

Billed to : DCDC Health Services Private Limited C-185, First Floor Rewari Line Industrial Area Mayapuri, Phase-II, Delhi, 110064	Shipped to : DCDC Health Services Private Limited DH,Sircilla Government Area Hospital Dist-Srichila,Near-Ambedkar Chowk Pin Code-505301
Party Mobile No. :	Party Mobile No. : 6304193195
GSTIN / UIN : 07AAFCD0204K1Z1	GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :	D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240173A	30019091	100.00	Pcs.	115.00	11,500.00
Add : CGST @ 6.00 %						690.00
Add : SGST @ 6.00 %						690.00
Add : Freight & Forwarding Charges						1,000.00
Grand Total					100.00 Pcs.	₹ 13,880.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	11,500.00	690.00	690.00	1,380.00


Rupees Thirteen Thousand Eight Hundred Eighty Only

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

Stock/No. of Boxes Received *01 Box*
Subject to Physical Check
Name/Employee Code *PC03040/S. D.*
Centre Name *S. I. C. I.*
Date/Time *11/08/24*
Signature *[Signature]* M. No. *6304193195*

Terms & Conditions
E. & O.E.
1. Goods once sold will not be taken back.
2. Interest @ 18% p.a. will be charged if the payment is not made within the stipulated time.
3. Subject to 'Delhi' Jurisdiction only.

Receiver's Signature : *[Signature]*



for Switchmeds
Authorised Signatory