

STPAI : 07CDLPD3R27N2Z6

Original Copy

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. : 2696/2024-25
Date of Issue : 28-09-2024
Place of Supply : Delhi (07)
Invoice Type : N
Reverse Charge :
RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 169-092024-27335
P.O Date : 04-09-2024
DRUG LIC NO :

Shipped to :
DCDC Health Services Private Limited
TH ATHANI
TALUKA GENERAL HOSPITAL ATHANI
DIALYSIS UNIT NEAR KARNATAKA BANK
MIRAJ ROAD BASVARESHWAR CIRCLE-591304
Party Mobile No : 9620715281
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
INJ. HEPARIN (25000 I.U.) GLH01N01	30019091	200.00	Pcs.	115.00	23,000.00

Received
Name
Centre No
Date/Time
Signature M. No.....

Add : CGST @ 6.00 % 1,380.00
Add : SGST @ 6.00 % 1,380.00

Grand Total 200.00 Pcs. ₹ 25,760.00

/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
9091	12%	23,000.00	1,380.00	1,380.00	2,760.00

Twenty Five Thousand Seven Hundred Sixty Only

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

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

Receiver's Signature :



for Switchmeds
Authorised Signatory

Stock/No. of Boxes Received : 01
Subject to Physical Check
Name/Employee Code : DC03423
Centre Name : G.H. Athani
Date/Time : 16-10-24
Signature : [Signature] M. No. : 7620715281