

TAX INVOICE
Switchmeds

604, Sunaja Tower-2, District Center,, Janakpuri, Delhi
Tel : 9988428970 email : switchmeds@gmail.com
Drug Licence No. : DL-JNK-145663
DL NO. DL-JNK-145663

Invoice No. : 1642/2023-24
Dated : 07-03-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station : 41-032024-25377
P O No. : 5/3/24
P O Date :
DRUG LIC NO :

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
District Hospital Ghaziabad District
Combined Hospital Sec 23
201001

Party Mobile No :
GSTIN / UIN : 07AAAFCD0204K1Z1
D.L. No. :

Party Mobile No : 8506002727
GSTIN / UIN :
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) Y2401-05B MRP-335.00 Exp -31-12-2025	30019091	300.00	Pcs.	125.00	37,500.00
					CGST @ 6.00 %	2,250.00
					SGST @ 6.00 %	2,250.00
Grand Total					300.00 Pcs.	42,000.00

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature
11-3-2024
No. 85888/9568

HSN/SAC	Tax Rate	Taxable Amt	CGST Amt	SGST Amt	Total Tax
30019091	12%	37,500.00	2,250.00	2,250.00	4,500.00

Rupees Forty Two Thousand Only

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

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 with in the stipulated time.
3. Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :



for Switchmeds
NEW DELHI
Authorised Signatory

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature
07 Dec 2024
26/10/24