

07CDLPD3827N2Z6

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. : 2145/2024-25
Dated : 08-06-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport : .

Vehicle No. :
Station :
P.O No. : 170-062024-26457
P.O Date : 06-06-2024
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 Bailhongal
TALUKA GENERAL HOSPITAL
BAILHONGAL, Dialysis Unit
Devlapur Road-591102

Party Mobile No : 8618706258
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. ERYTHROPOITIN 4000 IU 11020239	30021500	120.00	Pcs.	140.00	16,800.00
						
					Add : CGST @ 6.00 %	1,008.00
					Add : SGST @ 6.00 %	1,008.00
					Add : Freight & Forwarding Charges	746.00
Grand Total					120.00 Pcs.	₹ 19,562.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30021500	12%	16,800.00	1,008.00	1,008.00	2,016.00

Stock/No. of Boxes Received
Subject to Physical Check *Sunita*
Name/Employee Code
Centre Name *Bailhongal*
Date/Time *17/6/24 10:40 AM*
Signature *[Signature]* M. No.

Rupees Nineteen Thousand Five Hundred Sixty Two 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

[Signature]
Authorised Signatory