

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. : 2274/2024-25	Vehicle No. :
Dated : 09-07-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 143-072024-26650
Reverse Charge : N	P.O Date : 04-07-2024
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 : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 6304193195 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount()
1.	SODIUM HYPO 10% (5 LTR) VC2024/284	28289019	6.00	LTR	180.00	1,080.00
Add : CGST @ 9.00 %						97.20
Add : SGST @ 9.00 %						97.20
Add : Freight & Forwarding Charges						300.00
Grand Total 6.00 LTR						1,574.40


HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	1,080.00	97.20	97.20	194.40


Rupees One Thousand Five Hundred Seventy Four and Paise Forty 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

Authorised Signatory

Stock/No. of Boxes Received 03
Subject to Physical Check
Name/Employee Code S. N. Janki / 1203040
Centre Name PH. S. V. V. L.
Date/Time 08/07/24
Signature M. No. 6304193195