

GSTIN : 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. : 2379/2024-25	Vehicle No. :
Dated : 07-08-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 109-082024-26847
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  
 Ford Hospital  
 Samne Ghat Rd, Near BHU Trauma  
 Center, Balaji Nagar, Colony-221005

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

Party Mobile No : 9621142903  
 GSTIN / UIN : 07AAFCD0204K1Z1  
 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240099A	30019091	30.00	Pcs.	115.00	3,450.00
Stock/No. of Boxes Received ..... 1 box Subject to Physical Check Name/Employee Code ..... Maya / 0601135 Centre Name ..... Ford Hospital, Naraina Date/Time ..... 14/8/24 ..... 6:25 PM Signature ..... B ..... M. No. 8192955960						
					Add : CGST	
					Add : SGST @ 6.00 %	207.00
					Add : Freight & Forwarding Charges @ 6.00 %	207.00
						900.00
<b>Grand Total</b>					<b>30.00 Pcs.</b>	<b>₹ 4,764.00</b>

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	3,450.00	207.00	207.00	414.00

**Rupees Four Thousand Seven Hundred Sixty Four 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



Authorised Signatory