

SWITCH MEDS

711 VISHWA SADAN DISTRICT CENTRE JANAKPURI NEW DELHI-110058

Phone no. : 9999428970

Email : SWITCHMEDS@GMAIL.COM

GSTIN : 07CDLPD3827N2Z6

State: 07-Delhi

DL NO: DL-JNK-145663

Tax Invoice

Bill To

DCDC HEALTH SERVICE PVT LTD

First Floor C-185 Rewari Line
Industrial Area Mayapuri, Phase-II

Contact No. : 8527812533

GSTIN : 07AAFCD0204K1Z1

State: 07-Delhi

Ship To

Civil Hospital Ambala
Jagadhari Road Parshuram Chowk,
Sadar Bazar
Ambala Cant, 133001
Contact No 8506000682

Place of supply: 07-Delhi

Invoice No. : 1112

Date : 07-11-2023

PO Date : 16-10-2023

PO Number : 28-102023-23946

#	Item name	HSN/ SAC	Batch No.	Exp. Date	Mfg. Date	Quantity	Unit	Price/ Unit	GST	Amount
1	INJ . HEPARIN (25000 I.U.)	30019091	HIHE23019A	30/09/2025	10/2023	200	Pcs	₹ 134.00	₹ 3,216.00 (12%)	₹ 30,016.00
Total						200			₹ 3,216.00	₹ 30,016.00

Invoice Amount In Words

Thirty Thousand Sixteen Rupees only

Terms and Conditions

Thanks for doing business with us!

Sub Total	₹ 26,800.00
SGST@6%	₹ 1,608.00
CGST@6%	₹ 1,608.00
Total	₹ 30,016.00
Received	₹ 0.00
Balance	₹ 30,016.00
Payment mode	Credit

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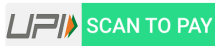
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Pay To-

Bank Name : AXIS
BANK, MOTI NAGAR,
NEW DELHI

Bank Account No. :
921020027370029

Bank IFSC code :
UTIB0001102

Account holder's
name : SWITCHMEDS

For, : SWITCH MEDS

Authorized Signatory