

GSTIN : 07CDLPL3827N2Z6

**TAX INVOICE**  
**Switchmeds**

Original Copy

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. : 2861/2024-25  
Dated : 19-10-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport : .

Vehicle No. :  
Station :  
P.O No. : 164-102024-27814  
P.O Date : 04-10-2024  
DRUG LIC NO :

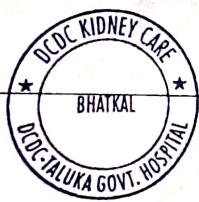
**Billed to :**  
DCDC Health Services Private Limited  
C-185, First Floor  
Rewari Line Industrial Area  
Mayapuri, Phase-II, Delhi, 110064

**Shipped to :**  
DCDC Health Services Private Limited  
TH Bhatkal  
BHATKAL TALUKA GOVT HOSPITAL  
Dialysis Unit-581320

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

Party Mobile No : 8105942976  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. Iron Sucrose (100 Mg)	30049099	200.00	Pcs.	26.00	5,200.00
					Add : CGST @ 6.00 %	312.00
					Add : SGST @ 6.00 %	312.00
					Add : Freight & Forwarding Charges	1,400.00
<b>Grand Total</b>						<b>200.00 Pcs. ₹ 7,224.00</b>



HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30049099	12%	5,200.00	312.00	312.00	624.00

**Rupees Seven Thousand Two Hundred Twenty Four Only**

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

Stock/No. of Boxes Received ..... 1 BOX  
Subject to Physical Check ..... Yes  
Name/Employee Code ..... R.RASKAR.NAIL  
Centre Name ..... BHATKAL  
Date/Time .....  
Signature ..... M. No. 9916672744

**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  
Authorized Signatory