

# SWITCH MEDS

711 VISHWA SADAN DISTRICT CENTRE JANAKPURI NEW DELHI-110058

Phone no : 9999428970

Email : SWITCHMEDS@GMAIL.COM

GSTIN : 07CDLPD3827N226

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

DCDC Health Service Pvt. Ltd. @

DH, Karimnagar

District Head Quarter Hospital

,Beside MCH Hospital

,Dist-Karimnagar, 505001

Contact No : 7732000738

Place of supply: 07-Delhi

Invoice No. : 1340

Date : 08-01-2024

PO Date : 05-01-2024

PO Number : 138-012024-24703

Item name	HSN SAC	Batch No.	Mfg. Date	Quantity	Price/ Unit	GST	Amount
1 Sodium Hypo 10% (5 Ltr)	2828	VC2023/261	12/2023	12	₹ 180.00	₹ 388.80 (18%)	₹ 2,548.80
2 shipping charges	9965			1	₹ 1,635.00	₹ 0.00 (0%)	₹ 1,635.00
<b>Total</b>				<b>13</b>		<b>₹ 388.80</b>	<b>₹ 4,183.80</b>

### Invoice Amount In Words

Four Thousand One Hundred Eighty Four Rupees only

### Terms and Conditions

Thanks for doing business with us!

Sub Total	₹ 3,795.00
SGST@9%	₹ 194.40
CGST@9%	₹ 194.40
Round off	₹ 0.20
<b>Total</b>	<b>₹ 4,184.00</b>
Received	₹ 0.00
Balance	₹ 4,184.00
Payment mode	Credit

Stock/No. of Boxes Received 3  
Subject to Physical Check  
Name/Employee Code .....  
Centre Name : Karimnagar  
Date/Time 02/01/2024  
Signature [Signature]

[Signature]  
DH-KAR. N.  
02/01/2024.

For SWITCH MEDS  
[Signature]  
Proprietor