

# 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

District Hospital, Lakhimpur Khiri

District Hospital, Lakhimpur Khiri,

Near T.B ward Hospital

road, Dist, Police line, Lakhimpur,

Uttar pradesh 262701.,

262701

Contact No : 6393323652

Place of supply: 07-Delhi

**Invoice No. : 1128**

**Date : 17-11-2023**

PO Date : 06-11-2023

PO Number : 87-112023-24127

#	Item name	HSN/ SAC	Batch No.	Exp. Date	Mfg. Date	Quantity	Unit	Price/ Unit	GST	Amount
1	INJ . HEPARIN (25000 I.U.)	30019091	HIHE23021C	30/09/2025	10/2023	200	Pcs	₹ 134.00	₹ 3,216.00 (12%)	₹ 30,016.00
<b>Total</b>						<b>200</b>			<b>₹ 3,216.00</b>	<b>₹ 30,016.00</b>

### 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

Stock/No. of Boxes Received ..... 1 box  
Subject to Physical Check  
Name/Employee Code ..... P.M. D. 2020  
Centre Name ..... Lakhimpur Khiri  
Date/Time ..... 30/11/23 ..... 10:30 AM  
Signature ..... [Signature] M. No. 9670498337

For SWITCH MEDS

Proprietor