

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. : 2061/2024-25  
Dated : 05-06-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport : .

Vehicle No. :  
Station :  
P.O No. : 64-062024-26351  
P.O Date : 04-06-2024  
DRUG LIC NO :

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

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

**Shipped to :**  
DCDC Health Services Private Limited  
Yathartha Hospital  
Plot Number-01, Sector 110  
Near Maharishi Ashram,Noida-201304

Party Mobile No : 7697109398  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240134A	30019091	200.00	Pcs.	115.00	23,000.00
<p>Stock/No. of Boxes Received ..... 1 Box Subject to Physical Check Name/Employee Code ..... DC02774 Centre Name ..... Yathartha Hospital (Noida) Date/Time ..... 14/6/24 ..... 1:30pm Signature ..... M. No. 789867184</p>						

Add : CGST  
Add : SGST

@ 6.00 %  
@ 6.00 %

1,380.00  
1,380.00

**Grand Total**      **200.00 Pcs.**

₹

**25,760.00**

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	23,000.00	1,380.00	1,380.00	2,760.00

**Rupees Twenty Five Thousand Seven Hundred Sixty Only**

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

**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

Authorised Signatory

