

GSTIN : 07CDLPD3827N2Z6

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**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. : 1730/2023-24	Vehicle No. :
Dated : 07-03-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 100-032024-25421
Reverse Charge : N	P.O Date : 5/3/24
GR/RR No. :	DRUG LIC NO :
Transport :	

<b>Billed to :</b> DCDC Health Services Private Limited C-185, First Floor Rewari Line Industrial Area Mayapuri, Phase-II, Delhi, 110064	<b>Shipped to :</b> DCDC Health Services Private Limited DCDC Kidney Care-Moti Nagar H-1,Kailash Park, Near Moti Nagar Metro Station , Pillar No-330, 110015
Party Mobile No : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 8840000500 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(`)
1.	INJ. HEPARIN (25000 I.U.) V2401-05b:MRP-335.00:Exp.-31-12-2025	30019091	600.00	Pcs.	125.00	75,000.00
2.	INJ. ERYTHROPOITIN 4000 IU 11020222:MRP-1,936.00:Exp.-30-08-2025	30021500	100.00	Pcs.	140.00	14,000.00
3.	SODIUM HYPO 10% (5 LTR)	28289019	18.00	LTR	180.00	3,240.00

Add : CGST	@	6.00 %	5,340.00
Add : SGST	@	6.00 %	5,340.00
Add : CGST	@	9.00 %	291.60
Add : SGST	@	9.00 %	291.60

**Grand Total 718.00 Units 1,03,503.20**

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	3,240.00	291.60	291.60	583.20
30019091	12%	75,000.00	4,500.00	4,500.00	9,000.00
30021500	12%	14,000.00	840.00	840.00	1,680.00
<b>Total</b>		<b>92,240.00</b>	<b>5,631.60</b>	<b>5,631.60</b>	<b>11,263.20</b>

**Rupees One Lakh Three Thousand Five Hundred Three and Paise Twenty 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 :



**Authorised Signatory**

Stock/No. of Boxes Received ..... 10 Boxes  
Subject to Physical Check  
Name/Employee Code ..... Abhishek / DE03155  
Centre Name ..... Moti Nagar  
Date/Time ..... 16/3/2024 2:20 pm  
Signature ..... M. No. 9873235142