

GSTIN : 07CDLPD3827N2Z6

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TAX INVOICE  
**Switchmeds**

254596050

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

72

Invoice No. : 1577/2023-2024  
Dated : 10-02-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport :

Vehicle No. :  
Station :  
P.O No. : 57-022024-25108  
P.O Date : 7/2/2024  
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  
Civil Hospital Rohtak Quilla Rd Company  
Bagh Rohtak Haryana  
124001

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

Party Mobile No : 8506000725  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR)	28289019	12.00	LTR	180.00	2,160.00
2.	INJ. ERYTHROPOITIN 4000 IU 11020219:MRP-1,936.00:Exp.-31-07-2025	30021500	500.00	Pcs.	140.00	70,000.00

Add : CGST	@	9.00 %	194.40
Add : SGST	@	9.00 %	194.40
Add : CGST	@	6.00 %	4,200.00
Add : SGST	@	6.00 %	4,200.00
Add : Freight & Forwarding Charges			3,674.00

**Grand Total**      **512.00 Units**      ₹      **84,622.80**

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	2,160.00	194.40	194.40	388.80
30021500	12%	70,000.00	4,200.00	4,200.00	8,400.00
<b>Total</b>		<b>72,160.00</b>	<b>4,394.40</b>	<b>4,394.40</b>	<b>8,788.80</b>

Stock/No. of Boxes Received ..... 12 .....  
Subject to Physical Check  
Name/Employee Code ..... DC 00470 .....  
Centre Name ..... C.N.I.L. ROHTAK .....  
Date/Time ..... 22-02-2024 .....  
Signature ..... M. No. 8506000725

Rupees Eighty Four Thousand Six Hundred Twenty Two and Paise Eighty 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  
NEW DELHI

Authorised Signatory