

# 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

DCDC@CIVIL HOSPITAL KAITHAL  
HUDA SECTOR 18, PATTI GADAR,  
KAITHAL, HARYANA-136027  
CONTACT-8506000651

Place of supply: 07-Delhi

**Invoice No. : 871**

**Date : 19-08-2023**

PO Date : 07-08-2023

PO Number : 66-082023-23335

| #            | Item name                        | HSN/<br>SAC | Batch No. | Exp. Date  | Mfg.<br>Date | MRP      | Quantity   | Price/<br>Unit | GST                 | Amount             |
|--------------|----------------------------------|-------------|-----------|------------|--------------|----------|------------|----------------|---------------------|--------------------|
| 1            | INJ .<br>HEPARIN<br>(25000 I.U.) | 30019091    | A23LV087B | 25/07/2025 | 08/2023      | ₹ 335.77 | 200        | ₹ 134.00       | ₹ 3,216.00<br>(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         |
| <b>Total</b> | <b>₹ 30,016.00</b> |
| Received     | ₹ 0.00             |
| Balance      | ₹ 30,016.00        |
| Payment mode | Credit             |
| You Saved    | ₹ 37,138.00        |

Stock/No. of Boxes Received ..... One .....  
Subject to Physical Check  
Name/Employee Code ..... Manu. Bansal / 10002754  
Centre Name ..... DCDC / C.H. Kaithal  
Date/Time ..... 22/8/23 ..... 10:00AM  
Signature ..... [Signature] ..... M. No. 9729646548