

# SWITCH MEDS

711 WISHWA 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

Deen Dayal Upadhyay Hospital  
Shimla  
Deen Dayal Upadhyay Hospital,  
Dialysis Unit, Near Old  
Bus Stand, Opp. Gurudwara, 171001  
Contact No : 9418291979

Place of supply: 07-Delhi

**Invoice No. : 1049**

**Date : 31-10-2023**

PO Date : 16-10-2023

PO Number : 48-102023-23910

Item name	HSN/ SAC	Batch No.	Exp. Date	Quantity	Unit	Price/ Unit	GST	Amount
1 INJ . HEPARIN (25000 I.U.)	30019091	HIHE23011B	30/05/2025	100	Pcs	₹ 134.00	₹ 1,608.00 (12%)	₹ 15,008.00
<b>Total</b>				<b>100</b>			₹ <b>1,608.00</b>	₹ <b>15,008.00</b>

Invoice Amount In Words

Fifteen Thousand Eight Rupees only

Terms and Conditions

Thanks for doing business with us!

Stock/No. of Boxes Received ..... 1  
Subject to Physical Check  
Name/Employee Code ..... D02074  
Centre Name ..... DDCDC Shimla  
Date/Time ..... 03/11/23  
Signature ..... M. No.....

Sub Total ₹ 13,400.00  
SGST@6% ₹ 804.00  
CGST@6% ₹ 804.00

**Total ₹ 15,008.00**

Received ₹ 0.00

Balance ₹ 15,008.00

Payment mode Credit

Proprietor

FOR SWITCHMEDS