

GSTIN : 07CDLPD317N226

TAX INVOICE

Original Copy

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. : 2229/2024-25
Dated : 06-07-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 200-072024-26671
P.O Date : 04-07-2024
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
TH Dandeli
Taluka Hospital Dandeli Taluka Dandeli
Dist-Uttar Kannada-581325

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

Party Mobile No : 8867417094
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	20.00	Pcs.	115.00	2,300.00
					Add : CGST	
					Add : SGST @ 6.00 %	138.00
					Add : Freight & Forwarding Charges @ 6.00 %	138.00
						150.00
Grand Total			20.00 Pcs.		₹	2,726.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	2,300.00	138.00	138.00	276.00

Rupees Two Thousand Seven Hundred Twenty Six 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

Authorized Signatory



Stock/No. of Boxes Received 1 Box
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time 18.7.2024 at 12.00m
Signature M. No.....

NH