

GSTIN : 07CDLPD3827N2Z6

Duplicate Copy

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. : 2316/2024-25
Dated : 11-07-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :Vehicle No. :
Station :
P.O No. : 199-072024-26770
P.O Date : 05-07-2024
DRUG LIC NO :

Billed to :

DCDC Health Services Private Limited
C-185, First Floor
Rewari Line Industrial Area
Mayapuri, Phase-II, Delhi, 110064Party Mobile No :
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

Shipped to :

DCDC Health Services Private Limited
TH Yellapura
Taluka Hospital Yallapur.Taluka Yallapur
Dist.Uttar Kannada-581359Party Mobile No : 9686989388
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)	
1.	INJ. ERYTHROPOITIN 4000 IU 11020242	30021500	120.00	Pcs.	140.00	16,800.00	
<p>Stock no. of boxes Received 01</p> <p>Submitted to Name of Buyer (Cd. No.) Meeta / DC0347 F Centre Name ... T. H. : Yellapur Date/Time 05/09/2024 at 11:00 Signature M. No. 9686989388</p>							
					@	6.00 %	1,008.00
					@	6.00 %	1,008.00
						Freight & Forwarding Charges	1,900.00
Grand Total						120.00 Pcs.	₹ 20,716.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30021500	12%	16,800.00	1,008.00	1,008.00	2,016.00

Rupees Twenty Thousand Seven Hundred Sixteen 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

Authorised Signatory