

GSTIN : 07CDLPD3827N2Z6

Original 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. : 1719/2023-24
Dated : 07-03-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport : .

Vehicle No. :
Station :
P.O No. : 89-032024-25398
P.O Date : 5/3/24
DRUG LIC NO :

Billed to :

DCDC Health Services Private Limited
C-185, First Floor
Rewari Line Industrial Area
Mayapuri, Phase-II, Delhi, 110064

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

Shipped to :

DCDC Health Services Private Limited
District Hospital, Pilibhit Dialysis Unit
District Hospital, Pilibhit Near Kendriy
Vidyalaya, Tanakpur Road, Ekta Nagar
Pilibhit, Uttar Pradesh 262001

Party Mobile No : 9045801912
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount()
1.	INJ. HEPARIN (25000 I.U.) V2401-05B:MRP-335.00:Exp.-31-12-2025	30019091	50.00	Pcs.	125.00	6,250.00

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code DC01973/Mohd Raza
Centre Name Pilibhit
Date/Time 13/3/24 1:50 PM
Signature M. Raza M. No. 9045801912

Add : CGST @ 6.00 % 375.00
Add : SGST @ 6.00 % 375.00

Grand Total 50.00 Pcs. 7,000.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	6,250.00	375.00	375.00	750.00

Rupees Seven Thousand 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