

GSTIN : 07CDLFD3827N2Z6

Original Copy

255151442

1-130X

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. : 1727/2023-24
Dated : 12-03-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport : .

Vehicle No. :
Station :
P.O No. : 82-032024-25417
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

Shipped to :
DCDC Health Services Private Limited
KCGMC Karnal Kalpana Chawla Government
Medical College, Model Town, Karnal,
132001

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

Party Mobile No : 8929946744
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount()	
1.	INJ. HEPARIN (25000 I.U.) V2401-06A:MRP-335.00:Exp.-31-12-2025	30019091	250.00	Pcs.	125.00	31,250.00	
Stock/No. of Subject to Physical Check Name of Centre Name Date/Time Signature		Stock/No. of Subject to Name Centre Name Date/Time Signature		Recd. No. 1 KCGMC Jyoti AG 2043 15-03-24 M. No. 8929946744			
Add : CGST					@	6.00 %	1,875.00
Add : SGST					@	6.00 %	1,875.00
Grand Total						250.00 Pcs.	35,000.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	31,250.00	1,875.00	1,875.00	3,750.00

Rupees Thirty Five 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 :



LR: 255151442
MAWB: 10140910078971
Box count: DOC
Client: DHYANCARG 010 B2BC
LM Pincodes: 132001
OID: switchmed 1727

10140910078983

for Switchmeds
NEW DELHI
Authorised Signatory