

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. : 2668/2024-25  
 Dated : 26-09-2024  
 Place of Supply : Delhi (07)  
 Reverse Charge : N  
 GR/RR No. :  
 Transport : .

Vehicle No. :  
 Station :  
 P.O No. : 202-092024-27413  
 P.O Date : 06-09-2024  
 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 Mundgod  
 Taluka Hospital Mundgod  
 Dist-Uttar Kannada-581349

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

Party Mobile No : 8073337671  
 GSTIN / UIN : 07AAFCD0204K1Z1  
 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount( )
1.	INJ. ERYTHROPOITIN 4000 IU 11020246	30021500	120.00	Pcs.	140.00	16,800.00
Add : CGST						1,008.00
Add : SGST						1,008.00
Add : Freight & Forwarding Charges						1,800.00
<b>Grand Total</b>			<b>120.00</b>	<b>Pcs.</b>		<b>20,616.00</b>



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

Stock/No. of Boxes Received 1 Box  
 Subject to Physical Check  
 Name/Employee Code Santosh N.B  
 Centre Name Mundgod  
 Date 16/09/24  
 Signature Santosh M. No. 8073337671

**Rupees Twenty Thousand Six 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.
- Goods once sold will not be taken back.
  - Interest @ 18% p.a. will be charged if the payment is not made within the stipulated time.
  - Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :



for Switchmeds

Authorised Signatory