

GSTIN : 07CDLPD3827N2Z6

Original Copy

TAX INVOICE Switchmeds

604, Suneja Tower-2, District Center,, Janakpuri, Delhi
Tel : 9990428970 email : switchmeds@gmail.com
Drug Licence No : DL-JNK-145663
DL NO. DL-JNK-145663

Invoice No. : 2040/2024-25
Dated : 20-05-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 205-052024-26190 ✓
P.O Date : 11-05-2024
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
URMILA MEMORIAL HOSPITAL
URMILA MEMORIAL HOSPITAL (UMH)
NAHAR RD, NEAR ISBT DHEBAR CITY
BHATAGAON-493222
Party Mobile No : 9050092608
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

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

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR) -IC2024-271	28289019	6.00	LTR	180.00	1,080.00
Grand Total						₹ 1,274.40

Stock/No. of Boxes Received 6 Can
Subject to Physical Check
Name/Employee Code DC09208
Centre Name Urmila Hospital, Reimul
Date/Time 05/06/24 M. No. 8305940380
Signature [Signature] M. No. 8305940380
Add : SGST

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	1,080.00	97.20	97.20	194.40

Rupees One Thousand Two Hundred Seventy Four and Paise Forty Only

Bank Details : A/C NAME: SWITCH MEDS BANK NAME: AXIS BANK
A/C NO. 921020027370029 IFSC CODE: UT180001102

Terms & Conditions
C & D E
1. Goods once sold will not be taken back.
2. Interest @ 28% 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

1-bundel
3-Box