

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. : 2041/2024-25	Vehicle No. :
Dated : 20-05-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 205-052024-26192
Reverse Charge : N	P.O Date : 11-05-2024
GR/RR No. :	DRUG LIC NO :
Transport :	

<b>Billed to :</b> DCDC Health Services Private Limited C-185, First Floor Rewari Line Industrial Area Mayapuri, Phase-II, Delhi, 110064	<b>Shipped to :</b> DCDC Health Services Private Limited URMILA MEMORIAL HOSPITAL URMILA MEMORIAL HOSPITAL(UMH) NAHAR RD NEAR ISBT,DHEBAR CITY BHATAGAON-493222
Party Mobile No : TIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 9050092608 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240134A	30019091	50.00	Pcs.	115.00	5,750.00

Stock/No. of Boxes Received .....  
 Subject to Physical Check .....  
 Name/Employee Code .....  
 Centre Name .....  
 Date/Time .....  
 Signature .....

DCD 2208  
 Urmila Hospital, Rewari  
 05/05/24 08:08:40 AM

Add : CGST	@	6.00 %	345.00
Add : SGST	@	6.00 %	345.00

**Grand Total**      **50.00 Pcs.**      ₹      **6,440.00**

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	5,750.00	345.00	345.00	690.00

**Rupees Six Thousand Four Hundred Forty 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