

GSTIN : 07CDLPD3827N2Z6

Duplicate Copy

TAX INVOICE
Switchmeds

604, Suneja Tower-2, District Center,, Janakpuri, Delhi
Tel. : 9999428970 email : switchmeds@gmail.com

2759-3 Box

Drug Licence No. : DL-JNK-145663
DL NO. DL-JNK-145663

Invoice No. : 2759/2024-25	Vehicle No. :
Dated : 10-10-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 8-102024-27928
Reverse Charge : N	P.O Date : 04-10-2024
GR/RR No. :	DRUG LIC NO :
Transport : .	

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 Kalra Hospital A-4 5 6 Tulsi Dass Kalra Marg Kirti Nagar-110015
Party Mobile No : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 8051755839 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR) VC2024/292	28289019	6.00	LTR	180.00	1,080.00
<p>DCDCHSPL CENTRE-KALRA HOSPITAL, KIRTI NAGAR MATERIAL RECEIVED DATE: 10/10/24 TIME: 4:20 PM RECEIVED BY: Vasanthy 10/10/24</p>		<p>Stock/No. of Boxes Received 01 Box Subject to Physical Check Name/Employee Code D.02921 Centre Name Kalra Hospital Date/Time 10/10/24 Signature M. No. 8051755839</p>				

Add : CGST @ 9.00 % 97.20
Add : SGST @ 9.00 % 97.20

Grand Total 6.00 LTR ₹ 1,274.40

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: UTIB0001102

<p>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.</p>	Receiver's Signature :
	 <p>for Switchmeds Authorised Signatory</p>