

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. : 2384/2024-25	Vehicle No. :
Dated : 07-08-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 138-082024-26841
Reverse Charge : N	P.O Date : 05-08-2024
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

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

Shipped to :
DCDC Health Services Private Limited
DH, Karimnagar
District Head Quarter Hospital
Beside MCH Hospital Dist-Karimnagar
Pin Code-505001

Party Mobile No : 7732000738
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240099A	30019091	500.00	Pcs.	115.00	57,500.00
					Add : CGST @ 6.00 %	3,450.00
					Add : SGST @ 6.00 %	3,450.00
					Add : Freight & Forwarding Charges	3,000.00
Grand Total					500.00 Pcs.	₹ 67,400.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	57,500.00	3,450.00	3,450.00	6,900.00

Rupees Sixty Seven Thousand Four Hundred 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 :



Ajay Kumar V.
SGH Karimnagar
16/08/2024

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employer Code
Centre Name : Karimnagar M. No.
Signature M. No.

for Switchmeds
Authorized Signatory