

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. : 1867/2024-25
Dated : 09-04-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport : .

Vehicle No. :
Station :
P.O No. : 145-042024-25772
P.O Date : 5/4/24
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
GH,Gandhi Hospital,secbad
Gandhi Hospital,Bhoiguda Musheerabad,Dis
Hyderabad, 500020

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

Party Mobile No : 7793985614
GSTIN / UIN :
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount()
1.	INJ. HEPARIN (25000 I.U.) AB240094A:MRP-335.00	30019091	300.00	Pcs.	115.00	34,500.00
					Add : CGST	2,070.00
					Add : SGST	2,070.00
Grand Total					300.00 Pcs.	38,640.00

Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
12%	34,500.00	2,070.00	2,070.00	4,140.00

Thirty Eight Thousand Six Hundred Forty Only

Details : A/C NAME: SWITCH MEDS BANK NAME: AXIS BANK
A/C NO. 921020027370029 IFSC CODE: UTIB0001102

Stock/No. of Boxes Received 01
Subject to Physical Check
Name/Employee Code M. Duman
Centre Name Gandhi
Date/Time 23/4/24
Signature M. No.

Conditions

once sold will not be taken back.
st @ 18% p.a. will be charged if the payment
de with in the stipulated time.
t to 'Delhi' Jurisdiction only.

Receiver's Signature :



for Switchmeds



Authorized Signatory