

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. : 2204/2024-25  
Dated : 21-06-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport :

Vehicle No. :  
Station :  
P.O No. : 109-062024-26293  
P.O Date : 04-06-2024  
DRUG LIC NO :

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  
FORD HOSPITAL  
SAMANE GHAT RD, NEAR BHU TRAUMA  
CENTER, BALAJI NAGAR, COLONY-221005

Party Mobile No : 9621142903  
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	8.00	Pcs.	115.00	920.00

Stock/No. of Boxes Received ..... 1 box .....  
 Subject to Physical Check  
 Name ..... Maya / DCDC  
 Code .....  
 Cell No. .... 9811135  
 Date ..... 20/06/24  
 Signature .....  
 M No. .... 85915955960

Add : CGST @ 6.00 % 55.20  
 Add : SGST @ 6.00 % 55.20  
 Less : Rounded Off (-) 0.40

Grand Total 8.00 Pcs. 1,030.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	920.00	55.20	55.20	110.40

Rupees One Thousand Thirty 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