

SWITCH MEDS

711 VISHWA SADAN DISTRICT CENTRE JANAKPURI NEW DELHI-110058

Phone no. : 9999428970

Email : SWITCHMEDS@GMAIL.COM

GSTIN : 07CDLPD3827N2Z6

State: 07-Delhi

DL NO: DL-JNK-145663

Tax Invoice

Bill To

DCDC HEALTH SERVICE PVT LTD

First Floor C-185 Rewari Line
Industrial Area Mayapuri, Phase-II

Contact No. : 8527812533

GSTIN : 07AAFCD0204K1Z1

State: 07-Delhi

Ship To

DCDC@Civil Hospital Namaul
Civil Hospital Namaul, New Mohalla
Mandi, 123001
Contact No : 9119154122

Place of supply: 07-Delhi

Invoice No. : 898

Date : 21-08-2023

PO Date : 07-08-2023

PO Number : 60-082023-23386

#	Item name	HSN/ SAC	Quantity	Price/ Unit	GST	Amount
1	INJ . HEPARIN (25000 I.U.)	30019091	250	₹ 134.00	₹ 4,020.00 (12%)	₹ 37,520.00
Total			250		₹ 4,020.00	₹ 37,520.00

Invoice Amount In Words

Thirty Seven Thousand Five Hundred Twenty
Rupees only

Terms and Conditions

Thanks for doing business with us!

Sub Total	₹ 33,500.00
SGST@6%	₹ 2,010.00
CGST@6%	₹ 2,010.00
Total	₹ 37,520.00
Received	₹ 0.00
Balance	₹ 37,520.00
Payment mode	Credit

Pay To-

Bank Name : AXIS BANK,
MOTI NAGAR, NEW
DELHI

Bank Account No. :
921020027370029

Bank IFSC code :
UTIB0001102

Account holder's name :
SWITCHMEDS

For, : SWITCH MEDS

Authorized Signatory



UPI SCAN TO PAY