

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. : 1726/2023-24	Vehicle No. :
Dated : 07-03-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 91-032024-25416
Reverse Charge : N	P.O Date : 5/3/24
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 District Hospital Sitapur Dialysis Centre District Hospital, Sitapur, Near Water Tank/Lalbagh, Nal Basti, 261001
Party Mobile No : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 6386425509 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) V2401-05B:MRP-335.00:Exp.-31-12-2025	30019091	100.00	Pcs.	125.00	12,500.00

Stock No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature
M. No.

Add : CGST @ 6.00 %
Add : SGST @ 6.00 %

Grand Total 100.00 Pcs. 14,000.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	12,500.00	750.00	750.00	1,500.00

Rupees Fourteen Thousand 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 within the stipulated time.
3. Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :
Stock/No. of Boxes Received 1
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time 15/03/24
Signature
M. No. 6386425509



for **Switchmeds**
NEW DELHI
Authorised Signatory