

GSTIN : 07CDLPD3827N2Z6

TAX INVOICE

Duplicate Copy

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

7-Box

Invoice No. : 2342/2024-25
Dated : 11-07-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 65-072024-26658
P.O Date : 04-07-2024
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
District Hospital Firozabad
S.N.M. District Hospital & T.B
Sanatorium Rehna RD Bypass RD Company
Baag,Arya Nagar,Firozabad-283203
Party Mobile No : 8506000310
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR) VC2024/284	28289019	12.00	LTR	180.00	2,160.00
2.	INJ. HEPARIN (25000 I.U.) AB240134A	30019091	250.00	Pcs.	115.00	28,750.00
<p>Stock/No. of Boxes Received : 7 Box (Aypo) Subject to Physical Check Name/Employee Code : K.M. ... Add : CGST Centre Name : ... Add : CGST Date/Time : 28/7/24 ... Add : CGST Signature : ... M. No. : ... Add : CGST</p>						
				@	6.00 %	1,725.00
				@	6.00 %	1,725.00
				@	9.00 %	194.40
				@	9.00 %	194.40
						2,300.00

Grand Total 262.00 Units ₹ 37,048.80

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019		2,160.00	194.40	194.40	388.80
30019091	12%	28,750.00	1,725.00	1,725.00	3,450.00
Total		30,910.00	1,919.40	1,919.40	3,838.80

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

Rupees Thirty Seven Thousand Forty Eight and Paise Eighty 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