

GSTIN : 07CDLPD3827N2Z6

Original Copy

TAX INVOICE

Switchmeds

28

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. : 1539/2023-2024
Dated : 10-02-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 147-022024-25105
P.O Date : 6/2/2024
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 BADAUN DISTRICT
HOSPITAL BADAUN NEAR ROADWAYS STAND
COURT ROAD INFRONT OF HATHIPARK
243601

Party Mobile No : 7253990299
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR)	28289019	12.00	LTR	180.00	2,160.00
					@ 9.00 %	194.40
					@ 9.00 %	194.40
					Freight & Forwarding Charges	1,429.00
Grand Total					12.00 LTR	₹ 3,977.80

Stock/No. of Boxes Received 6
Subject to Physical Check
Name/Employee Code
Centre Name Badaun
Date/Time 24/02/24 02:53 PM
Signature
Add. No. Fr. & Fwd. Charges 9260916173

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	2,160.00	194.40	194.40	388.80

Rupees Three Thousand Nine Hundred Seventy Seven 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
NEW DELHI
Authorised Signatory