

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. : 1812/2024-25
Dated : 06-04-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 51-042024-25765
P.O Date : 05-04-2024
DRUG LIC NO :

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 Mathura Maharishi Daya
-nand Saraswati District Hospital, Dialy
-sis Unit, Civil Lines, Choubey Para,
Mathura, U.P.-281001,
Party Mobile No : 9837867021
GSTIN / UIN :
D.L. No. :

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

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount()
1.	INJ. HEPARIN (25000 I.U.) AB240094A:MRP-335.00:Exp.-28-02-2026	30019091	300.00	Pcs.	115.00	34,500.00
Stock/No. of Boxes Received 1 Box Subject to Physical Check Name/Employee Code DCDC 03-04 Centre Name D.H.U. Mathura Date/Time 04/04/2024 10:40 AM Signature M. No. 9837867021						
					@ 6.00 %	2,070.00
					@ 6.00 %	2,070.00
Grand Total					300.00 Pcs.	38,640.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	34,500.00	2,070.00	2,070.00	4,140.00

Rupees Thirty Eight Thousand Six Hundred Forty 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
Authorized Signatory