GSTIN : 07CDLPD[illegible]27N2Z6

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.	: 2232/2024-25	Vehicle No.	:
Dated	: 06-07-2024	Station	:
Place of Supply	: Delhi (07)	P.O No.	: 136-072024-26624
Reverse Charge	: N	P.O Date	: 04-07-2024
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

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

Shipped to :

DCDC Health Services Private Limited
DH-Jagtial
Govt General Hospital
Opp-Jagtial Muncipal Office
Dist-Jagital-505327

Party Mobile No : 9908470353
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) *AB240134A*	30019091	50.00	Pcs.	115.00	5,750.00
	Add : CGST			@	*6.00 %*	345.00
	Add : SGST			@	*6.00 %*	345.00
	Add : Freight & Forwarding Charges					600.00
	Grand Total		**50.00**	**Pcs.**	₹	**7,040.00**

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	5,750.00	345.00	345.00	690.00

Rupees Seven Thousand Forty Only

Bank Details : A/C NAME: SWITCH MEDS BANK NAME: AXIS BANK
A/C NO. 921020027370029 IFSC CODE: UTIB0001102

Stock/No. of Boxes Received ..... Hep - 50 nos
Subject to Physical Check
Name/Employee Code ..D. Ansl. 0502809
Centre Name ..... Jagtial
Date/Time 16/7/2024
Signature ..... M. No. 9908470353

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