

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. : 2594/2024-25  
Dated : 14-09-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport :Vehicle No. :  
Station :  
P.O No. : 136-092024-27375  
P.O Date : 04-09-2024  
DRUG LIC NO :**Billed to :**DCDC Health Services Private Limited  
C-185, First Floor  
Rewari Line Industrial Area  
Mayapuri, Phase-II, Delhi, 110064Party Mobile No :  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :**Shipped to :**DCDC Health Services Private Limited  
DH, Jagtial  
Govt General Hospital, Opp-Jagtial  
Municipal Office, Dist-Jagtial-505327Party 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.) AB240207A	30019091	100.00	Pcs.	115.00	11,500.00
Stock/No. of Boxes Received ..... 100 Heparin Subject to Physical Check Name/Employee Code ..... Anil DCO2809 Centre Name ..... Jagtial Date/Time ..... 27/09/2024 Signature ..... [Signature] M. No. .... 9908470353						

Add : CGST	@	6.00 %	690.00
Add : SGST	@	6.00 %	690.00
Add : Freight & Forwarding Charges			900.00

**Grand Total 100.00 Pcs. ₹ 13,780.00**

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	11,500.00	690.00	690.00	1,380.00

**Rupees Thirteen Thousand Seven Hundred 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