

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. : 1875/2024-25	Vehicle No. :
Dated : 09-04-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 136-042024-25786
Reverse Charge : N	P.O Date : 5/4/24
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	Shipped to : DCDC Health Services Private Limited DH, Jagtial Govt.General Hospital,Opp-Jagtial Muncip -al Office,Dist-Jagtial, 505327
Party Mobile No : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 9908470353 GSTIN / UIN : 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	100.00	Pcs.	115.00	11,500.00

Add : CGST @ 6.00 %	690.00
Add : SGST @ 6.00 %	690.00

Grand Total 100.00 Pcs. 12,880.00

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 Twelve Thousand Eight Hundred Eighty Only

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

Stock/No. of Boxes Received100 Heparine
 Subject to Physical Check
 Name/Employee CodeAnil Damera D002809
 Centre NameJagtial
 Date/Time23/04/2024
 Signature [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