

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. : 2022/2024-25
Dated : 11-05-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport : DELHIVERY

Vehicle No. :
Station : KURUKSHETRA
P.O No. : 107-052024-26110
P.O Date : 06-05-2024
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
DCDC DIALYSIS CENTER KURUKSHETRA
GOVERNMENT POLYCLINIC UMARI ROAD
SEC-04 KURUKSHETRA,HARYANA-136118

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

Party Mobile No : 9729050786
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:MRP-335.00	30019091	150.00	Pcs.	115.00	17,250.00
2.	INJ. ERYTHROPOITIN 4000 IU 11020229:MRP-0.00:Exp.-07-05-2024	30021500	500.00	Pcs.	140.00	70,000.00

Add : CGST @ 6.00 % 5,235.00
Add : SGST @ 6.00 % 5,235.00
Add : Freight & Forwarding Charges 2,287.00

Grand Total 650.00 Pcs. 1,00,007.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	17,250.00	1,035.00	1,035.00	2,070.00
30021500	12%	70,000.00	4,200.00	4,200.00	8,400.00
Total		87,250.00	5,235.00	5,235.00	10,470.00

Stock/No. of Boxes Received5.....
Subject to Physical Check
Name/Employee CodeDCDC.H.S.7.R.A.....
Centre NameKURUKSHETRA.....
Date/Time11.05.24.....
Signature
id. No. 70157/23

Rupees One Lakh Seven 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