

GSTIN : 07CDLPD3827N2Z6

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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. : 2373/2024-25
Dated : 01-08-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. :
Station :
P.O No. : 228-082024-26811
P.O Date : 01-08-2024
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
Guru Nanak Hospital
Guru Nanak Hospital, Sham Nagar
Shetal Colony Pin Code-140401

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

Party Mobile No : 9050092608
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240099A	30019091	150.00	Pcs.	115.00	17,250.00
2.	SODIUM HYPO 10% (5 LTR) VC2024/284	28289019	12.00	LTR	180.00	2,160.00
3.	PULSE OXIMETER	90189019	2.00	Pcs.	650.00	1,300.00
4.	NEBULISER MACHINE	90192090	1.00	Pcs.	890.00	890.00
	Add : CGST			@	6.00 %	1,166.40
	Add : SGST			@	6.00 %	1,166.40
	Add : CGST			@	9.00 %	194.40
	Add : SGST			@	9.00 %	194.40
	Add : Freight & Forwarding Charges					1,970.00
Grand Total					165.00 Units	₹ 26,291.60

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	2,160.00	194.40	194.40	388.80
30019091	12%	17,250.00	1,035.00	1,035.00	2,070.00
90189019	12%	1,300.00	78.00	78.00	156.00
90192090	12%	890.00	53.40	53.40	106.80
Total		21,600.00	1,360.80	1,360.80	2,721.60

Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature
M. No.

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

Terms & Conditions

- E.& O.E.
- Goods once sold will not be taken back.
 - Interest @ 18% p.a. will be charged if the payment is not made with in the stipulated time.
 - Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :



Stock/No. of Boxes Received
Subject to Physical Check
Name/Employee Code
Centre Name
20/08/24

Jay for Switchmeds
Authorised Signatory

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. : 2374/2024-25	Vehicle No. :
Dated : 01-08-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 228-082024-26840
Reverse Charge : N	P.O Date : 01-08-2024
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	Shipped to : DCDC Health Services Private Limited Guru Nanak Hospital Guru Nanak Hospital, Sham Nagar Shetla Colony Pin Code-140401
Party Mobile No : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 9050092608 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	GLUCOSTRIPS (ACCUSURE)	3822019	500.00	Pcs.	8.00	4,000.00
					Add : CGST @ 6.00 %	240.00
					Add : SGST @ 6.00 %	240.00
Grand Total			500.00	Pcs.	₹	4,480.00

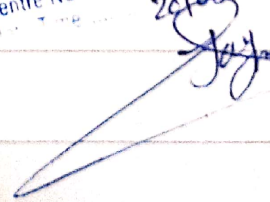
HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
3822019	12%	4,000.00	240.00	240.00	480.00


Rupees Four Thousand Four 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 Received 01
Subject to Physical Check
Name/Employee Code
Centre Name
Date 23/08/24

Terms & Conditions
E.& O.E.
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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