

GSTIN : 07CDLPD3827N2Z6

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

2121
3Invoice No. : 2121/2024-25
Dated : 08-06-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :Vehicle No. :
Station :
P.O No. : 127-062024-26302
P.O Date : 04-06-2024
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
Vemulawada
Area Hospital Vemulawada
DCDC Dialysis Centre Vemulawada
Rajanna Sircilla Dist-505302Party Mobile No : 9676237955
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR) VC2024/271	28289019	6.00	LTR	180.00	1,080.00

Add : CGST

@ 9.00 %

97.20

Add : SGST

@ 9.00 %

97.20

Add : Freight & Forwarding Charges

1,056.00

Grand Total

6.00 LTR

2,330.40

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	1,080.00	97.20	97.20	194.40

Rupees Two Thousand Three Hundred Thirty and Paise Forty 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

Authorized Signatory

Received
DCDC KIDNEY CARE
VEMULAWADA
17/06/24
DCDC-AREA HOSPITAL