

GSTIN : 07CDLPD3827N2Z6

Duplicate 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

2491
4

Invoice No. : 2491/2024-25
Dated : 20-08-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :

Vehicle No. : DL01LAL7150
Station : HISAR
P.O No. : 27-082024-26878
P.O Date : 05-08-2024
DRUG LIC NO :

Billed to :

DCDC Health Services Private Limited
C-185, First Floor
Rewari Line Industrial Area
Mayapuri, Phase-II, Delhi, 110064

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

Shipped to :

DCDC Health Services Private Limited
Civil Hospital Hisar
CIVIL HOSPITAL TAYAL BAGH COLONY
NEAR BUS STAND-125001

Party Mobile No : 7015463300
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. ERYTHROPOITIN 4000 IU 11020243	30021500	400.00	Pcs.	140.00	56,000.00
2.	INJ. HEPARIN (25000 I.U.) AB240173A	30019091	80.00	Pcs.	115.00	9,200.00

Add : CGST @ 6.00 % 3,912.00
Add : SGST @ 6.00 % 3,912.00
Add : Freight & Forwarding Charges 3,500.00

Grand Total 480.00 Pcs. ₹ 76,524.00

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	9,200.00	552.00	552.00	1,104.00
30021500	12%	56,000.00	3,360.00	3,360.00	6,720.00
Total		65,200.00	3,912.00	3,912.00	7,824.00

Rupees Seventy Six Thousand Five Hundred Twenty Four Only

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

Stock/No. of Boxes Received 4 Box
Subject to Physical Check 4 Box
Name/Employee Code ACO3254
Centre Name CH HISAR
Date/Time 20-08-24
Signature [Signature] M. No. 8506000594

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 :



for Switchmeds

Authorised Signatory