

**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

2389  
3

Invoice No. : 2389/2024-25  
Dated : 08-08-2024  
Place of Supply : Delhi (07)  
Reverse Charge : N  
GR/RR No. :  
Transport :

Vehicle No. :  
Station :  
P.O No. : 9-082024-27032  
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

**Shipped to :**

DCDC Health Services Private Limited  
Bhagat Chandra Hospital  
RZ-F 1/1 Mahavir Enclave Palam Dabri  
Road Near Dwarka Airport Flyover  
Pin Code-110045

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

Party Mobile No : 8287173256  
GSTIN / UIN : 07AAFCD0204K1Z1  
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR) VC2024/284	28289019	6.00	LTR	180.00	1,080.00
Add : CGST @ 9.00 %						97.20
Add : SGST @ 9.00 %						97.20
<b>Grand Total</b>					<b>6.00 LTR</b>	<b>₹ 1,274.40</b>

Stock/No. of Boxes Received ..... ③  
Subject to Physical Check  
Name/Employee Code .....  
Centre Name ..... Bhagat Chandra  
Time ..... 12.8/2.9 PM  
M. No. 8506074008  
*Manisha*

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

**Rupees One Thousand Two Hundred Seventy Four and Paise Forty Only**

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

**Terms & Conditions**

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

Receiver's Signature :



for Switchmeds

Authorised Signatory