

TAX INVOICE
Switchmeds

Original Copy

604, Suneja Tower-2, District Center,, Janakpuri, Delhi
Tel. : 9999428970 email : switchmeds@gmail.com

6-Box

Drug Licence No. : DL-JNK-145663
DL NO. DL-JNK-145663

Invoice No. : 2560 2024-25
Date : 07-09 2024
Place of Supply : Delhi (07)
Reverse Charge : N
GP/RR No.
Transport

Vehicle No
Station
P.O No : 145-097024-27419
P.O Date : 04-09 2024
DRUG LIC NO

Billed to :
DCDC Health Services Private Limited
C-185, First Floor
Rewari Line Industrial Area
Mayapuri, Phase-1, Delhi, 110064

Shipped to :
DCDC Health Services Private Limited
GH, Gandhi Hospital, secbad
Gandhi Hospital, Bhoiguda
Musheerabad Dist-Hyderabad-500020

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

Party Mobile No : 7793985614
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No.

S.N.	Description of Goods	HSN/SAC Cod	Qty. Unit	Price	Amount(₹)
1.	SODIUM HYPO 10% (5 LTR) VC/024/292	28289019	12.00 LTR	180.00	2,160.00

Add : CGST @ 9.00 % 194.40
Add : SGST @ 9.00 % 194.40
Add : Freight & Forwarding Charges 900.00

Grand Total 12.00 LTR ₹ 3,448.80

HSN/SAC	Tax Rate	Taxable Amt	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	2,160.00	194.40	194.40	388.80

Rupees Three Thousand Four Hundred Forty Eight and Paise Eighty Only

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

Terms & Conditions

Receiver's Signature :

for Switchmeds



Authorized Signatory

Received
Checked by Financial Clerk
Name/Employee Code : M. Suman / DC02882
Centre Name : Gandhi
Date/Time : 18/9/24 ; 6:00 PM
Signature : M. No.