

SWITCH MEDS

711 VISHWA SADAN DISTRICT CENTRE JANAKPURI NEW DELHI-110058

Phone no. : 9999428970

Email : SWITCHMEDS@GMAIL.COM

GSTIN : 07CDLPD3827N2Z6

State: 07-Delhi

DL NO: DL-JNK-145663

Tax Invoice

Bill To

DCDC HEALTH SERVICE PVT LTD

First Floor C-185 Rewari Line Industrial
Area Mayapuri, Phase-II

GSTIN : 07AAFCD0204K1Z1

State: 07-Delhi

Ship To

DCDC Health Service Pvt. Ltd. @

Civil Hospital Jind
CIVIL HOSPITAL JIND GOHANA ROAD,
126102

Contact No : 8295012840

Place of supply: 07-Delhi

Invoice No. : 804

Date : 18-07-2023

PO Date : 05-07-2023

PO Number : fa- 23-072023-23117

Item name	HSN/ SAC	Quantity	Price/ Unit	GST	Amount
1 BP INSTRUMENT	9018	2	₹ 1,600.00	₹ 384.00 (12%)	₹ 3,584.00
Total		2		₹ 384.00	₹ 3,584.00

Invoice Amount In Words

Three Thousand Five Hundred Eighty Four Rupees only

Terms and Conditions

Thanks for doing business with us!

Sub Total ₹ 3,200.00

SGST@6% ₹ 192.00

CGST@6% ₹ 192.00

Total ₹ 3,584.00

Received ₹ 0.00

Balance ₹ 3,584.00

Payment mode Credit

Pay To-

Bank Name : AXIS BANK,
MOTI NAGAR, NEW DELHI

Bank Account No. :
921020027370029

Bank IFSC code :
UTIB0001102

Account holder's name :
SWITCHMEDS

For, : SWITCH MEDS

Authorized Signatory



Stock/No. of Boxes Received ... 2 Pcs
Subject to Physical Check
Name/Employee Code ... Shubham ...
Centre Name ... DCDC Civil Jind ...
Date/Time ... 18-07-23 ...
Signature ... Shubham ... M. No. ... 8295012840