

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

Contact No. : 8527812533

GSTIN : 07AAFCD0204K1Z1

State: 07-Delhi

Ship To

DCDC Health Service Pvt. Ltd. @

GH,Gandhi Hospital,secbad

Gandhi Hospital,Bhoiguda

Musheerabad,DistHyderabad,

500020

Contact No : 6300817103

Place of supply: 07-Delhi

Invoice No. : 1000

Date : 14-10-2023

PO Date : 09-10-2023

PO Number : 145-102023-23939

#	Item name	HSN/SAC	Quantity	Unit	Price/Unit	GST	Amount
1	BP INSTRUMENT	9018	4	Pcs	₹ 1,600.00	₹ 768.00 (12%)	₹ 7,168.00
Total			4			₹ 768.00	₹ 7,168.00

Invoice Amount In Words

Seven Thousand One Hundred Sixty Eight Rupees only

Terms and Conditions

Thanks for doing business with us!

Sub Total ₹ 6,400.00

SGST@6% ₹ 384.00

CGST@6% ₹ 384.00

Total ₹ 7,168.00

Received ₹ 0.00

Balance ₹ 7,168.00

Payment mode Credit



Stock/No. of Boxes Received
Subj. to Physical Check
Name/Employee Code
Centre Name
Date/Time
Signature M. No.

For SWITCHMEDS

Handwritten Signature
Proprietor

Stock/No. of Boxes Received 01
Subj. to Physical Check
Name/Employee Code M. Kumar / DC02882
Centre Name Gandhi
Date/Time 30/10/23 14:00PM
Signature *Handwritten Signature* M. No.