

GSTIN : 07CDLPD3827N2Z6

255151487 Original 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

4-Box

Invoice No. : 1711/2023-24	Vehicle No. :
Dated : 07-03-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 92-032024-25379
Reverse Charge : N	P.O Date : 5/3/24
GR/RR No. :	DRUG LIC NO :
Transport :	

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 DIistrict Hospital Maharajganj Dialysis Center, District Hospital, Fareda road, Near Headquarters, 273303
Party Mobile No : GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :	Party Mobile No : 9792818661 GSTIN / UIN : 07AAFCD0204K1Z1 D.L. No. :


S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount()
1.	INJ. HEPARIN (25000 I.U.) V2401-06A:MRP-335.00:Exp.-31-12-2025	30019091	100.00	Pcs.	125.00	12,500.00
2.	SODIUM HYPO 10% (5 LTR)	28289019	6.00	LTR	180.00	1,080.00

DCDC HSPL CENTRE-DIST. HOSPITAL MAHARAJGANJ


MATERIAL RECEIVED	CGST	@	6.00 %	750.00
DATE: 18/3/24	Add : SGST	@	6.00 %	750.00
TIME: 2:45 Pm	Add : CGST	@	9.00 %	97.20
RECEIVED BY: [Signature]	Add : SGST	@	9.00 %	97.20
	Add : Freight & Forwarding Charges			1,855.00

Grand Total 106.00 Units 17,129.40

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	1,080.00	97.20	97.20	194.40
30019091	12%	12,500.00	750.00	750.00	1,500.00
Total		13,580.00	847.20	847.20	1,694.40



LR: 255151487
MAWB: 10140910078993
Box count: DDC
Client: DHYANCARGJ10 B2BC
LM Pincode: 273303
OID: switchmed 1711




10140910079000

Rupees Seventeen Thousand One Hundred Twenty Nine and Paise Forty 0

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

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

Receiver's Signature :

for Switchmeds
Authorised Signatory