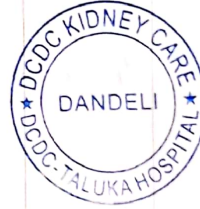


GSTIN : 07CDLPD3827N2Z6

TAX INVOICE
Switchmeds604, Suneja Tower-2, District Center,, Janakpuri, Delhi
Tel. : 9999428970 email : switchmeds@gmail.com
Drug Licence No. : DL-JNK-145663
DL NO. DL-JNK-145663Invoice No. : 2084/2024-25
Dated : 06-06-2024
Place of Supply : Delhi (07)
Reverse Charge : N
GR/RR No. :
Transport :Vehicle No. :
Station :
P.O No. : 200-062024-26301
P.O Date : 04-06-2024
DRUG LIC NO :**Billed to :**DCDC Health Services Private Limited
C-185, First Floor
Rewari Line Industrial Area
Mayapuri, Phase-II, Delhi, 110064Party Mobile No :
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :**Shipped to :**DCDC Health Services Private Limited
TH Dandeli
Taluka Hospital Dandeli. Taluka Dandeli
Dist.Uttar Kannada-581325Party Mobile No : 8867417094
GSTIN / UIN : 07AAFCD0204K1Z1
D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount(₹)
1.	INJ. HEPARIN (25000 I.U.) AB240134A	30019091	50.00	Pcs.	115.00	5,750.00
Add : CGST @ 6.00 %						345.00
Add : SGST @ 6.00 %						345.00
Grand Total					50.00 Pcs.	₹ 6,440.00



Name/Employee Code
 Centre Name
 Date/Time
 SignatureM. No.....

HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
30019091	12%	5,750.00	345.00	345.00	690.00

Stock/No. of Boxes Received 1
 Subject to Physical Check
 Name/Employee Code
 Centre Name
 Date/Time 06/06/2024
 Signature M. No. 9606713309

Rupees Six Thousand Four Hundred Forty Only

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

