

# 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. @  
Civil Hospital Jagadhari  
Vishnu Garden Near Government  
Rest House Jagadhari  
(Yamunanagar), 135003  
Contact No : 8506000536

Place of supply: 07-Delhi

**Invoice No. : 877**

**Date : 21-08-2023**

PO Date : 07-08-2023

PO Number : 50-082023-23347

| #            | Item name                  | HSN/ SAC | Quantity   | Price/ Unit | GST                 | Amount             |
|--------------|----------------------------|----------|------------|-------------|---------------------|--------------------|
| 1            | INJ . HEPARIN (25000 I.U.) | 30019091 | 300        | ₹ 134.00    | ₹ 4,824.00<br>(12%) | ₹ 45,024.00        |
| <b>Total</b> |                            |          | <b>300</b> |             | <b>₹ 4,824.00</b>   | <b>₹ 45,024.00</b> |

### Invoice Amount In Words

Forty Five Thousand Twenty Four Rupees only

Sub Total

₹ 40,200.00

SGST@6%

₹ 2,412.00

CGST@6%

₹ 2,412.00

### Terms and Conditions

Thanks for doing business with us!

**Total**

**₹ 45,024.00**

Stock/No. of Boxes Received ..... 1

Subject to Physical Check *Yes*

Name/Employee Code *DC 01938*

Centre Name *C.H Jagadhari*

Date/Time *21/8/23 5:40 PM*

Signature *Jagadhari*

Received

₹ 0.00

Balance

₹ 45,024.00

Payment mode *Cash*

Credit

### Pay To-

For, : SWITCH MEDS

Bank Name : AXIS BANK,  
MOTI NAGAR, NEW  
DELHI

Bank Account No. :  
921020027370029

Bank IFSC code :  
UTIB0001102

Account holder's name :  
SWITCHMEDS

Authorized Signatory



LPI SCAN TO PAY