

# DCDC Health Services Pvt. Ltd.

C-185 Mayapuri Industrial area Ph-2, New Delhi- 110 064

e-mail: info@ddcdc.co.in, Web: www.ddcdc.co.in

Voucher No .....

Date ..... 1/5/2023

## Cash Payment

Particulars	Amount ( )
Debit:	
fare for Tom Dialysis	70/-
(Rupees..... Only):	
Narration : Seventy Rupees.	

Receiver's Signature



Voucher Prepared By

Accounts Deptt.

