DATE: __/__/__

DCDC Health Services Pvt. Ltd.

C-185 Mayapuri Industrial area Ph-2, New Delhi- 110 064
e-mail: info@dcdc.co.in, Web: www.dcdc.co.in

Cash Payment

Voucher No .....

Date 17/12/22

Particulars	Auto fare for fire extinguisher cylinder received from Narak	Amount ( )
Debit:		300/-
(Rupees ..... Three Hundred Rupees ..... Only):		
Narration:		

DCDC KIDNEY CARE ★ MOTI NAGAR ★ DCDC-KALRA HOSPITAL

Receiver's Signature | Voucher Prepared By | Accounts Deptt. | Approved By

Scanned with OKEN Scanner