

# CASH / CREDIT MEMO

From

No. : .....

Date : 10/01/23

M/s: ~~Acde~~ Kidney Care shared

Description	Qty.	Rate	Amount Rs. P.
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① changeover team fee to <del>Sumda</del>			200 - 00
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Thank You!

Total

200 - 00

• Goods once sold will not be taken back.  
E.&O.E.

Issued by \_\_\_\_\_

Received by \_\_\_\_\_


