1. WATER MUST BE SUPPLIED WITHIN 24 HOURS.
2. DEPOT MANAGER MUST CHECK /SIGN. THIS CARD ATLEAST ONCE IN A WEEK.
3. FOR FURTHER SUGGESTION/COMPLAINT CONTACT MANAGER OPERATION.

Date	QTY. SPL.	EMPTY RECEIVED	BALANCE EMPTY

BILL/CASH

Pure Well Mineral Water

LOCAL WATER SUPPLIER ON TIME DELIVERY

V.P.O. SANKHOL, TEHSIL-BAHADURGARH-124507 (HARYANA)
MOBILE : 9991737737

Name: Civil Hospital

Sr. No: 7407

Date: 31/05/24

Sr. No.	Description of Goods	Qty.	Rate	Amount Rs.	P.
1	water Can	19	30	570	
			TOTAL	570	

DCDC KIDNEY CARE BAHADURGARH DCDC-CIVIL HOSPITAL
8/6/24

Account Holder : PURE WELL MINERAL WATER
Account Number : 50200046194180
IFSC : HDFC0003934
Branch : BARKATABAD
Account Type : CURRENT

E.&.O.E

Auth. Signature