

CASH VOUCHER

Date. 30/03/2024

No. _____

Pay Paid Amount for photo charges March Month
the sum of Rupees Fourteen hundred Rupees only

being

and debit

Authorised by



ZAFFERGHAD

Received the above sum of Rs. 1400/-

as stated here in

Paid by

DCDC Health Services Pvt Ltd

Cheque No.

Cash

on (Bank)

1400/-

Receiver's Signature