

# DCDC Health Services Pvt. Ltd.

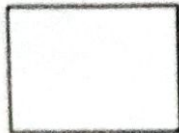
C-185 Mayapuri Industrial area Ph-2, New Delhi- 110 064  
e-mail: info@dcdc.co.in, Web: www.dcdc.co.in

## Cash Payment

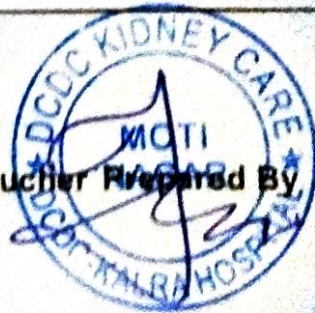
Date 27/09/24

Voucher No .....

Particulars	Amount ( )
Debit:	
<u>Am Sheet</u>	<u>380</u>
(Rupees..... <u>Three hundred eighty rupees</u> .....Only):	<u>380/-</u>
Narration:	



Receiver's Signature



Voucher Prepared By

Accounts Deptt.

Approved By