

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 ..... 1

Date 31.10.24 .....

| Particulars                                      | Amount ( ) |
|--------------------------------------------------|------------|
| Debit:                                           | 2000/-     |
| Milk Expense for 27 days 54165Rs                 |            |
|                                                  |            |
|                                                  |            |
|                                                  |            |
|                                                  |            |
| (Rupees- <u>Two thousand rupees</u> ..... Only): | 2000       |
| Narration:                                       |            |



Voucher Prepared By

Accounts Deptt.

Approved By