

CASH / CREDIT MEMO

From

Nephrologist Camp Expenses

No.

Date: 17/02/22

M/s: Acute Kidney Care Pharmacy

Description	Qty.	Rate	Amount Rs. P.	
① Bouquet	02	200	400	
② Tea & Biscuits			130	00
③ Biscuits bottle	06		60	00
Thank You!		Total	590	00

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

Issued by _____

Received by _____

[Handwritten Signature]
17/02/22