

# VOUCHER

PAID TO \_\_\_\_\_ NO.: \_\_\_\_\_ DATE: 5/4/2024

DEBIT Staff Conveyance

ON A/C OF \_\_\_\_\_

PARTICULARS :	RS.	PS.
<u>Staff Conveyance</u>	<u>Zero.</u>	<u>00</u>
<u>from Krishnamangaly to</u>	<u>1</u>	
<u>Jithanth Hospital</u>		
RUPEES IN WORDS	TOTAL	<u>000.00</u>

AUTHORISED BY \_\_\_\_\_ PASSED BY Aashy

PAID CASH/CHEQUE DRAWN ON \_\_\_\_\_

CHEQUE NO. \_\_\_\_\_ DATE: 5/4/2024

RECEIVERS SIGN. 