VOUCHER

No. _____

Firm's Name : Nephrine Renal Care

Date 30.10.24

PARTICULARS	₹	P.
DEBIT		
Wooden Drawer Repair	400	
TOTAL		
CREDIT		
TOTAL	400/-	

RECEIVED the sum of Rupees _____

Approved by Nadeem Chowdhary

Signature

Receiver's Signature मुकेश 7613191960