

# 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

Voucher No ..... 3 .....

## Cash Payment

Date ..... 18/9/23 .....

Particulars	Amount ( )
Debit: To	
Kunal (Jr. Tech)	100
(Rupees..... One hundred only..... Only):	100/-
Narration: Travel Expense for <del>bring</del> bring diesel.	



Receiver's Signature



Voucher Prepared By

Accounts Deptt.

Approved By