



CASH / CREDIT MEMO

93155-52988
98135-11410

JITENDER SHARMA

Branch : Kaharan Gali, JAGADHRI-135003

No. **374**

Dated **30-03-24**

Customer's Name **CIVIL HOSPITAL
JAGADHRI**

Qty.	PARTICULARS	RATE	AMOUNT	
			Rs.	P.
26	Water Jar MAR-2024	50/-	1300	-
For AQUA COLD		Total	1300	00

कैम्पर गुम होने की जिम्मेवारी ग्राहक की होगी।

Signature