

CASH / CREDIT MEMO

93155-52988  
98135-11410



**JITENDER SHARMA**

Branch : Kaharan Gali, JAGADHRI-135003

No. **343**

Dated **29/12/2024**

Customer's Name **CIVIL HOSPITAL**  
**Jagadhri**

Qty.	PARTICULARS	RATE	AMOUNT	
			Rs.	P.
<b>24</b>	<b>Water Jar</b> <b>Feb 2025</b>	<b>502</b>	<b>1200</b>	
<b>For AQUA COLD</b>		<b>Total</b>	<b>1200</b>	

कैम्पर गुम होने की जिम्मेवारी ग्राहक की होगी।

Signature