

# DCDC Health Services Pvt. Ltd.

C-185 Mayapuri Industrial area Ph-2, New Delhi- 110 064  
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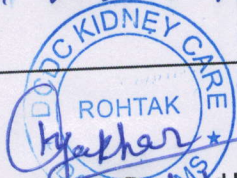
## Cash Payment

Date 29/5/23

Voucher No .....

Particulars	Amount ( )
Debit:	
→ A4 form paper X 3 Pack	810/-
→ 1 Pen box (3) X 1 (10TP.)	50/-
(Rupees ..... <u>Eight hundred sixty only</u> ..... Only):	<u>860/-</u>
Narration: <u>Purchased in PTMS services.</u>	

Receiver's Signature



Voucher Prepared By  
29/5/23

Accounts Deptt.

Approved By