

VOUCHER

No. _____

Firm's Name: Mishra Meenies. Corp. Date 07/01/25

RECEIVED the sum of Rupees _____ on A/c of _____

| PARTICULARS | ₹ | P. |
|---------------------------------------|------------|-----------|
| DEBIT <u>₹</u> | | |
| <u>HT. Line infection Charge</u> | <u>500</u> | <u>00</u> |
| <u>For - Phase - 1 HT. Line TOTAL</u> | | |
| CREDIT _____ | | |
| <u>Request with Patas Sam.</u> | | |
| APPROVED | | |
| TOTAL | <u>500</u> | <u>00</u> |

Request from

Approved by Pratap K. Das

Signature Dr. M. Prasad

APPROVED
Mishra Meenies

Receiver's Signature (N/A)

