(Clients Copy)

Company Name: _____ Date: _____

Address: _____

_____

CASH RECEIPT

Received from _____ Rs. _____

_____

For _____

Amount in Number: _____

Payment Method:

CASH	Check	Money Order/Draft

Signature:

_____ _____

(Client) (Receiver)

- - - - - - - - - - - - -

ICOMS-2013

(Official Copy)

Company Name: _____ Date: _____

Address: _____

_____

CASH RECEIPT

Received from _____ Rs. _____

_____

For _____

Amount in Number: _____

Payment Method:

CASH	Check	Money Order/Draft

Signature:

_____ _____

(Client) (Receiver)