18/08/2022

TO THE DIRECTORS

DIVINE DENTAL CLINIC

DAR SIR

RE; REQUISITION FOR FUNDS

PLEASE AUTHORISE THE PAYMENT OF FUNDS WORTH 105000 (ONE HUNDRED FIVE THOUSAND) SHILLINGS TO BE PAID TH ROUTINE DENTAL AND MEDICAL SUPPLIES FOR DENTAL SUPPLIESAS EXPLAINED BELOW

NEWSTETIC GLASS LA (1) 80000

OPEN COIL SPRINGS (1) 25000

TOTAL 105000