

3300 8358

SHAHICO SERVICES

Customer Refund Request Form

Date: 04-02-2020 Project No: LM-00015/LM9400 Branch: ADLIYA

Customer Name: MUHAMMAD SAQIB

Project Name: CEILING LISA

Reason Refund:

Invoice Amount	Paid Amount	Outstanding Amount
750.000	515.000	235.000

Client Signature:



Remarks from Accounts:

Sign H.O.D

Sign Accounts

Sign MD