

## Payment Receipt

<b>Apartment Name</b>	<b>Apartment No.</b>	<b>Payment Status</b>	<b>Service Name</b>	<b>Amount</b>	<b>Due Date</b>	<b>Service Date</b>
C-3	Scheme-33	Paid	Water Service Billing	200	2024-05-03	5/2024