

DEBTOR STATEMENT

A/C No.: 300-C03190

Debtor: CHIN KIM SAN (N2L-3A-228)

Statement Date: 31/03/2025

Address: NO.31 LALUAN MEDAN 5
TAMAN MEDAN PUSING
31550 PUSING
PERAK

Terms: C.O.D.

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DATE	REF.	DESCRIPTION	DR	CR	BALANCE
		Balance B/F			0.00
30/03/2025	IN INV2503/092	INVOICE	23,880.00		23,880.00
30/03/2025	OR OR-97505	DOWNPAYMENT FOR BEREAVEMENT CARE SERVICE PACKAGE		8,000.00	15,880.00

RINGGIT MALAYSIA FIFTEEN THOUSAND EIGHT HUNDRED EIGHTY ONLY

RM : 15,880.00

Mar 2025	Feb 2025	Jan 2025	Dec 2024	Nov 2024	Oct 2024
15,880.00	0.00	0.00	0.00	0.00	0.00
Sep 2024	Aug 2024	Jul 2024	Jun 2024	May 2024	Apr 2024+
0.00	0.00	0.00	0.00	0.00	0.00

We shall be grateful if you will let us have payment as soon as possible. Any discrepancy in this statement must be reported to us in writing within 10 days.