

Mess name _____ Bill no. _____ Date _____

Monthly bill

Member name _____ Mobile _____

Plan ☐ Two meals ☐ One meal ☐ Tiffin

Period: from _____ to _____

Monthly fee	₹
Earlier dues	₹
Extras (details: _____)	₹
Deductions (details: _____)	₹
Total due	₹
Paid (Date: _____ ☐ Cash ☐ UPI)	₹
Balance	₹

Phone _____ UPI ID _____

Please pay by: _____ Owner's signature _____

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