



MANUAL SUMMARY RECONCILIATION REPORT

PUSTAKA NEGERI SARAWAK

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NO	NAME	AMOUNT
TOTAL		

Received by Officer In-Charge :				Received by Account Department :			
_____				_____			
Signature				Signature			
Name	:			Name	:		
Date	:	Amount	:	Date	:	Amount	:

Document No.	:	FRM-IS-13
Revision No.	:	0
Effective Date	:	1 st October 2019