

DEBTOR STATEMENT

A/C No.: 300-L02427

Debtor: LIM HIN FA (F1F-09-238)

Statement Date: 28/02/2025

Address: NO.8, PERSIARAN PENGKALAN BARAT 13
TAMAN RASA SAYANG PASIR PUTEH
31650 IPOH
PERAK

Terms: C.O.D.

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DATE	REF.	DESCRIPTION	DR	CR	BALANCE
26/05/2023	OR OR-61815	FULL PAYMENT FOR BEREAVEMENT CARE SERVICE PACKAGE		8.00	-8.00

RINGGIT MALAYSIA (EIGHT ONLY)

RM : -8.00

Feb 2025	Jan 2025	Dec 2024	Nov 2024	Oct 2024	Sep 2024
0.00	0.00	0.00	0.00	0.00	0.00
Aug 2024	Jul 2024	Jun 2024	May 2024	Apr 2024	Mar 2024+
0.00	0.00	0.00	0.00	0.00	-8.00

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.