



SHISHU GHAR REGISTER

Creche Address

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Monthly Creche Committee Meeting

Date of the Meeting : _____

No. of Participants : _____

Key Discussion & Action Pointers

Signature of the Attendees:

S.No	Signature	S.No	Signature
1		11	
2		12	
3		13	
4		14	
5		15	
6		16	
7		17	
8		18	
9		19	
10		20	

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Cash Register

Month _____				Year _____
<i>Balance from the previous month</i>		_____		
<i>Amount received this month</i>		_____		Signature of supervisor
				Signature of caregivers
Date	Receipt (Rs.)	Expense (Rs.)	Expense Details (in short)	Signature
Weekly Balance Amount: _____				Signature of supervisor
Date	Receipt (Rs.)	Expense (Rs.)	Expense Details (in short)	Signature
Weekly Balance Amount: _____				Signature of supervisor
Date	Receipt (Rs.)	Expense (Rs.)	Expense Details (in short)	Signature

Weekly Balance Amount: _____				Signature of supervisor
Date	Receipt (Rs.)	Expense (Rs.)	Expense Details (in short)	Signature
Weekly Balance Amount: _____				Signature of supervisor
Balance Amount		_____		
Closing Balance for the Month		_____		

