

BUSINESS RECEIPT

Company Name: _____
Street Address: _____
City, State, Zip: _____
Phone: _____
Fax: _____
Email: _____

Date: _____

Receipt #: _____

QTY	Description	Unit Price	Total

Subtotal: _____

Tax Rate: _____

Tax: _____

Total Amount Due: _____

Amount Paid: _____

Customer/Client Information

Name: _____
Street Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

Payment Method:
 Credit Card (No. _____)
 Cash
 Check (No. _____)
 Other: _____

Authorized Signature _____

Title: _____

