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| **Cash Receipt** |
|  |
| Company Name |  | Phone no. |  |  | Your Logo Here |
| Address |  | Email |  |  |  |
| Cash No. |  |  | Date |  |
| Cash Received From |  | Of$ |  |
| For |  |
|  |
| Total Amount Due |  |  | **Payment**  |[ ]  Cash |  |
| Amount Received |  |  |  |[ ]  Note |  |
| Balance Due |  |  |  |[ ]  Cheque |  |

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