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| --- | --- | --- | --- |
| Logo placeholder  Your Company Name  Your Company Slogan  Street Address, City, ST ZIP Code  Phone: Phone  Fax: Fax  Email  RECEIPT # NO.  Date: Date  THANK YOU FOR YOUR BUSINESS! |  | PAYMENT RECEIPT | |
|  | SOLD TO: Contact Name  Company Name  Street Address  City, ST ZIP Code  Phone  Customer ID: No. |
| |  |  |  | | --- | --- | --- | | PAYMENT METHOD | CHECK NO. | job | |  |  |  | | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | qty | item # | description | | unit price | discount | line total | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  | | | Total discount | |  |  | |  | | | Subtotal | | |  | |  | | | Sales Tax | | |  | |  | | | Total | | |  | | |