

RECEIPT

[Seller Name]
Address: _____

Tel.: _____
Fax: _____
Email: _____

Date: _____
Receipt No.: _____
Account No.: _____
Purchase Order No.: _____

Billing Address

Name: _____
Attn: _____
Address: _____

Tel.: _____

Delivery Address

Name: _____
Attn: _____
Address: _____

Tel.: _____
Shipping Date: _____

Description	Quantity	Unit Price	Total
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Subtotal \$ _____
Sales Tax @ _____ % \$ _____
Shipping \$ _____
Other: _____ \$ _____
(Discount) (\$ _____)
Total Amount \$ _____

The Seller confirms that the Purchaser has paid the Total Amount on _____ [payment date]
with the payment method of: (Check one)

- Cash
- Personal check
- Cashier's check
- Money order
- Credit or debit card
- PayPal
- Other: _____

Notes: _____

