# Receipt

| RECEPT | | NO. |
|---|---|---|
| Payee Name:<br>Address:<br>City, ST ZIP Code: | Payer Name:<br>Address:<br>City, ST ZIP Code: | |
| **DATE** | **DESCRIPTION** | **AMOUNT** |
| | | |
| | SUBTOTAL | |
| | TAX | |
| | TOTAL | |

| RECEPT | | NO. |
|---|---|---|
| Payee Name:<br>Address:<br>City, ST ZIP Code: | Payer Name:<br>Address:<br>City, ST ZIP Code: | |
| **DATE** | **DESCRIPTION** | **AMOUNT** |
| | | |
| | SUBTOTAL | |
| | TAX | |
| | TOTAL | |

| RECEPT | | NO. |
|---|---|---|
| Payee Name:<br>Address:<br>City, ST ZIP Code: | Payer Name:<br>Address:<br>City, ST ZIP Code: | |
| **DATE** | **DESCRIPTION** | **AMOUNT** |
| | | |
| | SUBTOTAL | |
| | TAX | |
| | TOTAL | |