OFFICIAL RECEIPT

Receipt No: _____

Date: _____

RECEIVED FROM

Name:

Address:

Contact No:

DESCRIPTION	AMOUNT

PAYMENT METHOD

☐ Cash

☐ Check

☐ Card

☐ Bank Transfer

Subtotal: _____

Tax / VAT: _____

Total Paid: _____

Balance Due: _____

_____

PREPARED BY

AUTHORIZED SIGNATURE

Thank you for your business. This constitutes full and final payment for the services/products described above.