

ADVANCE PAYMENT RECEIPT

Receipt No: _____

Date: _____

Reference No: _____

RECEIVED FROM

Name / Co: _____

Address: _____

Phone: _____

Email: _____

PROJECT / SALES DETAILS

Project/Item: _____

Estimated Date: _____

Sales Rep: _____

Status: _____

DESCRIPTION OF GOODS / SERVICES RESERVED

DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL

Payment Method:

- Cash
 Check
 Card
 Bank Transfer

Total Contract Value: _____

Advance Paid: _____

Remaining Balance: _____

Terms & Conditions:

1. The advance/retainer payment is required to secure the goods, services, or booking as detailed above.
2. Unless otherwise specified, advance payments are non-refundable and will be applied towards the final invoice total.
3. The remaining balance, if any, is due upon delivery, completion of services, or according to agreed payment terms.

AUTHORIZED SIGNATURE

CUSTOMER SIGNATURE