

RECEIPT

Receipt No: _____
Date: _____

CLIENT / BILL TO

PAYMENT METHOD

Method of Payment: _____
Transaction ID: _____
Check / Reference No: _____

DESCRIPTION OF CONSULTANT SERVICES	HOURS / QTY	RATE	LINE TOTAL

Subtotal: _____

Tax / VAT: _____

Total Paid: _____

Consultant Signature

Client Signature / Acknowledgment

Thank you for your business!