PAYMENT RECEIPT

Receipt No:

Date:

Invoice Ref:

RECEIVED FROM

Name:

Company:

Address:

Email/Phone:

RECEIVED BY

Company:

Address:

Email/Phone:

Tax ID/Reg:

DESCRIPTION / PAYMENT ALLOCATION	INVOICE AMOUNT	AMOUNT PAID	BALANCE DUE

Total Invoiced:

Total Paid:

Remaining Balance:

PAYMENT METHOD DETAILS

Payment Method:

Transaction ID:

Prepared By

Authorized Signature / Stamp