

RECEIPT

Retainer Design Services

Receipt No: _____

Date: _____

Billing Period: _____

FROM

TO

DESCRIPTION OF RETAINER SERVICES	HOURS INCLUDED	RATE / HOUR	TOTAL
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Subtotal _____

Tax / VAT _____

Total Paid _____

Payment Method

Transaction ID

Payment Date

AUTHORIZED REPRESENTATIVE

CLIENT SIGNATURE

Thank you for your continued partnership.