

# INSTALLMENT RECEIPT

Company Name: \_\_\_\_\_

Address/Contact: \_\_\_\_\_

Receipt No: \_\_\_\_\_

Date: \_\_\_\_\_

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## CUSTOMER DETAILS

Customer Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## SALES & ACCOUNT DETAILS

Original Invoice No: \_\_\_\_\_

Description of Goods/Services: \_\_\_\_\_

Installment No:    of

Due Date: \_\_\_\_\_

## PAYMENT SUMMARY

Description	Amount
Total Contract / Sale Amount	
Previous Balance Outstanding	
<b>Current Amount Paid</b>	
<b>Remaining Balance Outstanding</b>	

## PAYMENT METHOD

Cash

Cheque (No: \_\_\_\_\_ )

Credit / Debit Card

Bank Transfer

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RECEIVED BY (AUTHORIZED SIGNATURE)

CUSTOMER SIGNATURE