

RECEIPT

Receipt No: _____

Date: _____

FROM

TO

DESCRIPTION OF SERVICE	QTY	RATE	AMOUNT

Subtotal _____

Tax/VAT _____

Total Paid _____

PAYMENT METHOD

- ☐ Cash
- ☐ Bank Transfer
- ☐ Credit Card
- ☐ Check

RECEIVED BY (SIGNATURE)

AUTHORIZED SIGNATURE