

QUARTERLY RECEIPT

Receipt No: _____
Date: _____
Billing Period: _____

SUBSCRIBER DETAILS

Subscriber Name: _____

Company: _____

Email: _____

Billing Address: _____

SUBSCRIPTION PLAN

Plan Name: _____

Cycle: _____

Quarterly

Start Date: _____

End Date: _____

SUBSCRIPTION DESCRIPTION	UNIT PRICE	QTY	TOTAL
--------------------------	------------	-----	-------

Subtotal: _____

Discount: _____

Tax Rate: _____

Tax Amount: _____

Total Paid: _____

PAYMENT DETAILS

Payment Method: _____

Transaction ID:

Status:

AUTHORIZED SIGNATURE

CUSTOMER SIGNATURE
