

RECEIPT

Receipt No: -----
Date: -----

CONSULTANT INFO

Name

Email

Phone

CLIENT INFO

Client Name

Company

Email/Phone

Description of Consulting Services	Hours	Rate	Total
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Payment Method

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

Transaction Ref:

Subtotal

Tax / VAT

Total Paid

PREPARED BY (SIGNATURE)

RECEIVED BY (SIGNATURE)

Thank you for your business!