

# BUSINESS RECEIPT

Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

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

Receipt #: \_\_\_\_\_

QTY	Description	Unit Price	Total

Subtotal: \_\_\_\_\_

Tax Rate: \_\_\_\_\_

Tax: \_\_\_\_\_

Total Amount Due: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

## Customer/Client Information

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Payment Method:  
☐ Credit Card (No. \_\_\_\_\_)  
☐ Cash  
☐ Check (No. \_\_\_\_\_)  
☐ Other: \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Title: \_\_\_\_\_

