

RECEIPT

Business: _____ Date: _____

Product: _____ Price: _____

Product: _____ Price: _____

Product: _____ Price: _____

Product: _____ Price: _____

Product: _____ Price: _____

Sub-total: _____ Tax: _____ Total: _____ Cash Paid: _____

RECEIPT

Business: _____ Date: _____

Product: _____ Price: _____

Product: _____ Price: _____

Product: _____ Price: _____

Product: _____ Price: _____

Product: _____ Price: _____

Sub-total: _____ Tax: _____ Total: _____ Cash Paid: _____