OFFICIAL RECEIPT

PAID

ISSUED BY

Business name _____

Address _____

Tax ID _____

Phone / email _____

RECEIPT DETAILS

Receipt no. _____

Date _____

RECEIVED FROM

Name _____ Payer's tax ID _____

Address _____

AMOUNT AND PURPOSE

The sum of (in words) _____

For _____

PAYMENT

Amount received _____

Payment method _____

Check or transaction no. _____

Date received _____

_____ _____

Authorized signature Print name and title

Please keep this receipt as your record of payment.