PLUMBING PAYMENT RECEIPT

PAID

PLUMBING CONTRACTOR

Business name _____

Address _____

Phone / email _____

RECEIPT DETAILS

Receipt no. _____

Receipt date _____

RECEIVED FROM

Client name _____

Address _____

JOB

Job address _____

Work order no. _____

Work performed _____

Invoice no.	Invoice date	For	Invoice total

PAYMENT

Payment method _____

Check no. / reference _____

Date received _____

Amount invoiced	
Paid earlier (deposit)	
Amount paid now	
Balance after this payment	

_____

Received by

This receipt confirms payment in full of the invoice listed above.