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| Logo placeholder  Your Company Name  Your Company Slogan  Street Address, City, ST ZIP Code  Phone: Phone  Fax: Fax  Email  RECEIPT # NO.  Date: Date  THANK YOU FOR YOUR BUSINESS! |  | SALES RECEIPT | |
|  | SOLD TO: Contact Name  Company Name  Street Address  City, ST ZIP Code  Phone  Customer ID: No. |
| |  |  |  |  | | --- | --- | --- | --- | | PAYMENT METHOD | Receipt number | Transaction id | Matric number | | \_Method\_ | \_Receipt\_ | \_Id\_ | \_Matric\_ | | |
|  | |