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| Sales Receipt |  | Logo placeholder |
| DATE  Click or tap here to enter text. | INVOICE NO  Click or tap here to enter text. | YOUR COMPANY  Street Address  City, ST ZIP Code  Phone  Fax  Email |
| INVOICE TO  Click or tap here to enter text.  Click or tap here to enter text.  Click or tap here to enter text.  Click or tap here to enter text.  Click or tap here to enter text. |  |  |

| Payment Method | CHEQUE NO | JOB |
| --- | --- | --- |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |  |

| Quantity | Item NO | Unit Price | Line Total |
| --- | --- | --- | --- |

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| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Sales Tax | Click or tap here to enter text. |
| Total | Click or tap here to enter text. |