|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Cash Receipt** | | | | |
|  |  |  | Posting Date: | PostingDate |
| Type: | No.: | Partner Type: | Partner No.: | Partner Name: |
| Type | No | PartnerType | PartnerNo | PartnerName |
| **Line No.** | **Description** | | | **Amount** |
| LineNo | Description | | | Amount |
| ……………………………………………………..  Payer's Signature | | | | TotalAmount |