|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Receipt | | | No. | |
| Payee Name:  Address:  City, Province, Postal Code: | | Payer Name:  Address:  City, Province, Postal Code: | | |
| Date | Description | | | Amount |
|  |  | | |  |
| Subtotal | | |  |
| Tax | | |  |
| Total | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Receipt | | | No. | |
| Payee Name:  Address:  City, Province, Postal Code: | | Payer Name:  Address:  City, Province, Postal Code: | | |
| Date | Description | | | Amount |
|  |  | | |  |
| Subtotal | | |  |
| Tax | | |  |
| Total | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Receipt | | | No. | |
| Payee Name:  Address:  City, Province, Postal Code: | | Payer Name:  Address:  City, Province, Postal Code: | | |
| Date | Description | | | Amount |
|  |  | | |  |
| Subtotal | | |  |
| Tax | | |  |
| Total | | |  |