



## STORE NAME

Address Line 1

Address Line 2

Phone Number

Date: YYYY-MM-DD Time: HH:MM

Receipt No: 12345678

Cashier: [Cashier Name]

Qty	Description	Price
1	Item Name 1	10.00
2	Item Name 2	20.00
Subtotal:		30.00
Tax:		3.00
Total:		33.00

Payment Method: Cash/Card

Change: 10.00

**Thank you for your purchase!**

Please visit us again!