

Receipt Number: _____

Date: _____

Received From _____ the amount of \$ _____

For _____

<input type="checkbox"/>	Cash
<input type="checkbox"/>	Cheque
<input type="checkbox"/>	Money Order

Current Balance: \$ _____

Payment Amount: \$ _____

Balance Due: \$ _____

Received By: _____

Cash Sale Receipt

Receipt Number: _____

Date: _____

Received From _____ the amount of \$ _____

For _____

<input type="checkbox"/>	Cash
<input type="checkbox"/>	Cheque
<input type="checkbox"/>	Money Order

Current Balance: \$ _____

Payment Amount: \$ _____

Balance Due: \$ _____

Received By: _____

