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| --- | --- | --- | --- | --- | --- | --- | --- |
| Receipt | | | No. | |  | Receipt | No. |
| Your Name:  Address:  City, ST ZIP Code: | | Payer Name:  Address:  City, ST ZIP Code: | | |  | Payer Name:  Address:  City, ST ZIP Code: | |
| Date | Description | | | Amount |  | DATE | Amount |
|  |  | | |  |  |  |  |
| Subtotal | | |  |  | Subtotal |  |
| Tax | | |  |  | Tax |  |
| Total | | |  |  | Total |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Receipt | | | No. | |  | Receipt | No. |
| Your Name:  Address:  City, ST ZIP Code: | | Payer Name:  Address:  City, ST ZIP Code: | | |  | Payer Name:  Address:  City, ST ZIP Code: | |
| Date | Description | | | Amount |  | DATE | Amount |
|  |  | | |  |  |  |  |
| Subtotal | | |  |  | Subtotal |  |
| Tax | | |  |  | Tax |  |
| Total | | |  |  | Total |  |