**ITEMIZED SALES RECEIPT**

Receipt Number: [Number]

Date: [Date]

|  |  |
| --- | --- |
| **Sold to:** | |
| Name: [Name] | Merchant Name: [Merchant Name] |
| Company Name: [Company Name] | Merchant Phone Number: [Phone Number] |
| Street Address: [Address] | Merchant Street Address: [Address] |
| City/State/ZIP: [City], [State], [Zip Code] | City/State/ZIP: [City] [State] [Zip Code] |
| Phone Number: [Phone Number] | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Description** | **Quantity** | **Price/Unit** | **Line Total** |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | | Subtotal |  |
| Discount |  |
| Sales Tax |  |
| **Total** |  |

Payment Method: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card/Check Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_