|  |  |
| --- | --- |
| **Date:** | [Date] |
| **Receipt #:** | [Number] |

**CASH PAYMENT RECEIPT**

|  |
| --- |
| [Company/Individual Name] |
| [Street Address] |
| [City, State, Zip] |
| [Phone Number] |
| [Email Address] |

**PAYMENT INFORMATION**

|  |  |
| --- | --- |
| Paid by: | [Name] |
| Amount Paid: | [Reason] |
| For Payment of: | [Name] Dollars ($ [Amount]) |
| Subtotal: | $ [Amount] |
| Tax Rate (%): | $ [Amount] |
| Total Tax: | $ [Amount] |
| Total Amount Due: | $ [Amount] |
| Amount Paid: | $ [Amount] |
| Remaining Balance: | $ [Amount] |
| Received By: | [Name] |

|  |  |  |
| --- | --- | --- |
| [Signature] |  | [Date] |
| **Authorized Signature** |  | **Date** |