

Your Business Name

Street address · City, ST ZIP
Phone · email · website

SALES RECEIPT

NO. _____
DATE _____

SOLD TO _____

DESCRIPTION OF GOODS / SERVICES	QTY	UNIT PRICE	AMOUNT

Subtotal	\$
Sales tax	\$
Total	\$

PAYMENT METHOD

Cash
 Check
 Card
 Other

SALESPERSON _____

Give this top copy to your customer. A valid receipt shows the amount, date, place, and what was sold (IRS Pub. 463).

DUPLICATE · KEEP FOR YOUR RECORDS

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Total	\$

PAYMENT METHOD

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 Check
 Card
 Other

SALESPERSON _____

Keep this duplicate for your records. It backs up your income numbers at tax time (IRS Pub. 583).