

# Food Truck Receipt

Receipt #

Date

Time  hh:mm am/pm

Food Truck Name

Cashier

Customer Name

Item	Qty	Unit Price	Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Subtotal

Tax

Total

Payment Method

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Customer Signature

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Cashier Signature