

Cash Payment Receipt

[Your Business Name]

[Business Address]

[City, State, ZIP]

[Phone / Email]

Receipt No. _____ Date _____

Received From _____

Amount (in words) _____

Amount (in figures) _____

Payment For _____

Payment Method ☐ Cash ☐ Cheque ☐ Other: _____

Received By

Signature

Note: Please retain this receipt for your records.