DINE-IN RECEIPT

[Restaurant Name]
[Address]
[Phone Number]

Date		Time	
Receipt No.		**Table No.**	
Server Name		**Guests**	

#	Description	Qty	Unit Price	Amount
Subtotal				
Tax (%)				
Service Charge (%)				
Total				
Paid				
Balance				

Notes / Special Instructions:

Customer Signature

Authorized By
Thank you for dining with us!