

CUSTOMER ORDER NO.	DATE
NAME	
ADDRESS	
PURPOSE OF PAYMENT <input type="checkbox"/> RENT <input type="checkbox"/> GOODS <input type="checkbox"/> _____	

PAYMENT METHOD	AMOUNT DUE
<input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHECK	THIS PAYMENT
<input type="checkbox"/> MONEY ORDER <input type="checkbox"/> CASH	BALANCE DUE

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.
QTY	DESCRIPTION	PRICE	AMOUNT	

**RECEIPT**