**EVENT PAYMENT RECEIPT**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Transaction/Receipt #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Guest(s)/Attendee(s) Information**

Guest/Attendee 1 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guest/Attendee 2 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Event Information**

Event Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Payment Information**

|  |  |  |  |
| --- | --- | --- | --- |
| QTY | Event Fee/Description | Unit Price | Total |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Notes: | Subtotal |  |
| Tax Rate |  |
| Total Tax |  |
| Total |  |
| Paid by: [ ]  Cash [ ]  Credit (No. \_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_) [ ]  Check (No. \_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_) [ ]  Other: |

**Authorized Signature** [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/)

Representative’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_