EQUIPMENT SALES RECEIPT

	Date:		
	Red		
		Seller Name:	
	Seller Phone Number:		
Sold to:			
Name:			
Company Name:			
Street Address:			
City/State/ZIP:			
Phone Number:			
Equipment Description	Serial Number	Quantity	Price Total (\$)
		Subtotal:	
		Tax Rate:	
		Taxes Due:	
	Total	Amount Due:	
Amount Paid:	Dollars (\$)		
Payment made by: ☐ Check / ☐ Cree	dit Card / Other:		
Check/Card #			

ALL EQUIPMENT IS SOLD "AS-IS" WITH NO WARRANTIES OR GUARANTEES WHATSOEVER

