

# Tightwad Fire Protection District

## Sales Receipt

Date:

Payer:

Amount: \$

Pmt. Ref. No.

- EFT
- Cash
- Check
- Debit Card
- Credit Card

Sales Rcpt. No.:

Account:

↑ Pmt Meth

PO:

Memo:

Product/Service	Description	Qty/Rate	Amount	Class
A.			\$	
B.				
C.				
D.				
E.				

**Notes:**