

PAYMENT RECEIPT

Proof of payment against an invoice — amount received, method, and balance remaining.

Received by (business) _____

Received from _____

For invoice # _____

Receipt # _____

Payment date _____

Payment method _____

Payment	Amount
Invoice total	
Amount received this payment	
Prior payments (if any)	

BALANCE REMAINING

A zero balance marks the invoice paid in full. Keep a copy with the original invoice — it is the audit trail.