

EQUIPMENT RENTAL RECEIPT

Date: _____

Receipt number: _____

Customer Information

Name: _____

Address: _____

Phone: _____

Equipment Number	Description	Rental Fee	Line Total

Subtotal: _____

Tax: _____

Grand total: _____

Payment method: Check / Credit Card / Other: _____

Check/Card # _____

Received by: _____

Signature: _____

