

# Retail Goods Received Payment Voucher

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Voucher No.: \_\_\_\_\_  
Date: \_\_\_\_\_

## Supplier Details

Supplier Name: \_\_\_\_\_  
Invoice No.: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Invoice Date: \_\_\_\_\_

## Goods/Items Received

No	Description of Goods	Quantity	Unit Price	Total

Subtotal: \_\_\_\_\_  
Discount: \_\_\_\_\_  
Tax (if any): \_\_\_\_\_  
Total Amount: \_\_\_\_\_  
Amount Paid: \_\_\_\_\_  
Balance Due: \_\_\_\_\_

## Payment Method

Method: \_\_\_\_\_ Reference No.: \_\_\_\_\_

## Remarks

\_\_\_\_\_

Received By

Checked By

Authorized By

Date Printed: \_\_\_\_\_  
Signature of Payer: \_\_\_\_\_