

# Retail Merchandise Payment Voucher

Voucher No.

---

Date

---

Location / Store

---

Supplier Name

---

Supplier Address

---

Supplier Contact

## Merchandise Details

#	Description	SKU/Item Code	Quantity	Unit Price	Total
1					
2					
3					
<b>Subtotal</b>					
<b>Tax</b>					
<b>Total Amount</b>					

## Payment Details

Payment Method

---

Payment Date

---

Reference / Cheque No.

---

Remarks / Notes

---

---

Prepared By

---

Checked By

---

Approved By

---

Supplier Acknowledged

