

Retail Store Purchase Delivery Receipt

Receipt No: _____ Date: _____

Store Name: _____

Store Address: _____

Phone: _____ Email: _____

Customer Name: _____

Delivery Address: _____

Contact Number: _____

No.	Item Description	Quantity	Unit Price	Total
Grand Total				

Delivery Date: _____

Received By: _____

Remarks: _____

Customer Signature

Store Representative Signature