

Goods Purchase Receipt

Date:

Receipt No.:

Sold By:

Sold To:

Address:

Item Description	Quantity	Unit Price	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Grand Total			<input type="text"/>

Received By:

Signature: _____