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| **TRAINING RECEIPT** | | | | | | | |
| Payment Date: |  | Payment Method: | | |  | Receipt #: | |
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|  | | |  |  | | | |
| **From:** | | |  | **Sold To:** | | | |
| [Your Name/Company Name] | | |  | [Client's Name/Company Name] | | | |
| [Address Line 1] | | |  | [Address Line 1] | | | |
| [Address Line 2] | | |  | [Address Line 2] | | | |
| [City], [State], [Zip Code] | | |  | [City], [State], [Zip Code] | | | |
| [Phone] | | |  | [Phone] | | | |
|  | | |  |  | | | |
| Description | | | Quantity | Unit Price | | | Total |
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|  | | |  | Subtotal: | | |  |
| Remarks: | | |  | Tax Rate: | | |  |
|  | | |  | Tax: | | |  |
|  | | |  | Total Due: | | |  |
|  | | |  | Amount Paid: | | |  |
| Thank you for your business! | | | | | | | |