

**RECEIPT FOR CHILD CARE SERVICES**

**Date** \_\_\_\_\_

**Amount \$** \_\_\_\_\_

**Received from** \_\_\_\_\_

**Name of child(ren)** \_\_\_\_\_

**For Child Care Services from** \_\_\_\_\_ **to** \_\_\_\_\_

**Provider's Signature** \_\_\_\_\_

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