COMPANY NAME
ADDRESS
ADDRESS

DATE	SERVER	TABLE NO.	PERSONS	CHECK NO.
				000001

	FOOD	AMOUNT

	BEVERA	
	G.S.T./H.S.T.	
	PROV. TAX	
	TOTAL	

PROOF

℮ 84-28

GUEST RECEIPT

000001

COMPANY NAME
ADDRESS
ADDRESS
ADDRESS

DATE	AMOUNT
20	

Thank You *It was a pleasure to serve you.*