

Name of the organization/daycare center			
Receipt number		Date of receipt	
<i>Type of receipt</i>			
Quarterly/Monthly/weekly			
Name of daycare owner			
Name of caretaker			
Name of child			
Age		Sex	
Time/hours for staying in daycare			
A sum of \$/Rs. _____ received by _____ (Guardian/client name) for the duration of _____ to _____.			
Charges for various facilities provided by centre			
Signature			