

Receipt For Daycare Services: Year-end-Statement

Parent/ Family Name: _____

Address: _____

Children Name: _____

Amount Paid:\$ _____

For Care Provided From: _____ **To:** _____

Daycare Name: _____ **Lisc#** _____

Providers Full Name: _____

Address: _____

Provider's Social Security Number or Employee Identification Number# _____

Providers Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

Receipt For Daycare Services: Year-end-Statement

Parent/ Family Name: _____

Address: _____

Child/ren Name: _____

Amount Paid:\$ _____

For Care Provided From: _____ **To:** _____

Daycare Name: _____ **Lisc#** _____

Providers Full Name: _____

Address: _____

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Providers Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____