

Name: _____ Date: _____

Store Receipt Activity

Questions

What is the name of the store? _____

What is the date on the receipt? _____

What time was the purchase made? _____

How much did the stain remover cost? _____

How much did the planner cost? _____

How much did the crayons cost? _____

How much did the safety pins cost? _____

What was the cost of the tax? _____

What was the total cost? _____

How much was given to the cashier? _____

How much change was given back? _____

Oscar 99 Cent Store

450 Main Street
Tower, VA 22324
(804) 555-1456

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2/10/20 1:35pm

1	Stain Remover	\$.99
1	Planner	\$3.00
1	Crayons	\$.59
1	Safety pins	\$1.00

Subtotal	\$5.58
Tax	\$.75
Total	\$6.33

Cash	\$10.00
Change	\$ 3.67