

Accounts Payable Receivable Ledger Form

Business Information

Company Name: _____

Address: _____

Contact Number: _____

Email Address: _____

Ledger Details

Vendor/Customer Name: _____

ID Number: _____

Reporting Period: From: _____ To:

Payables and Receivables Table

Date	Description	Payable Amount	Receivable Amount	Balance	Notes

Summary

Total Payables: _____

Total Receivables: _____

Prepared By: _____

Date: _____

Authorized By: _____

Signature: _____