Hotel Receipt Form PDF

Hotel Inf	formation
• H	otel Name:
• A	ddress:
	hone:
	formation
• G	uest Name:
• A	ddress:
• C	heck-in Date:
• C	heck-out Date:
Billing C	Oetails oom Type:
	oom Rate:
	umber of Nights:
Additior	nal Charges
• R	oom Service:
• M	ini Bar:
	/iFi:
• 0	ther:
Paymen	t Information
• S	ubtotal:

Payment Method:					
ole of Charges					
Date	Description	Quantity	Amount (\$)		
	e:				
Date:					

• Taxes: _____