

Guest Invoice

Hotel Accommodation

Invoice No.

Date

Guest Name

Reservation No.

Check-in Date

Check-out Date

Room Type

Room No.

CHARGES

| DESCRIPTION | QTY/NIGHTS | UNIT PRICE | AMOUNT |
|-------------|------------|------------|--------|
|-------------|------------|------------|--------|

Subtotal

Taxes/Fees

Total

Amount Paid

Balance Due

Guest Signature