

Hotel Name

123 Sample Street
City, Country 12345
Phone: (123) 456-7890
Email: info@hotel.com

Payment Receipt

Date: _____
Receipt #: _____

Guest Details

Name: _____
Address: _____
Phone: _____
Email: _____

Reservation Info

Room No: _____
Check-In: _____
Check-Out: _____
Booking Ref: _____

Invoice Details

#	Description	Qty	Unit Price	Amount
1	Room Charge	____	____	____
2	Food & Beverages	____	____	____
3	Other Services	____	____	____

Subtotal: _____

Taxes & Fees: _____

Total: _____

Amount Paid: _____

Balance Due: _____

Payment Method: _____
Received By: _____

Thank you for staying with us!
Please retain this receipt for your records.