HOTEL RECEIPT TEMPLATE

|  |  |  |  |
| --- | --- | --- | --- |
| GUEST NAME |  | RECEIPT NO. |  |
| STREET ADDRESS |  | ROOM NO. |  |
| CITY, STATE & ZIP |  | DISCOUNT CODE |  |
| PHONE |  | COMPANY |  |
| EMAIL |  | CONFERENCE NO. |  |

|  |  |  |  |
| --- | --- | --- | --- |
| ARRIVAL DATE |  | DEPARTURE DATE |  |
| ARRIVAL TIME |  | DEPARTURE TIME |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NUMBER OF GUESTS | ADULTS |  | CHILDREN |  |
| ADDITIONAL ROOMS | GUEST |  | CONFERENCE |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| DATE OF CHARGE | DESCRIPTION | QTY | AMOUNT | TOTAL |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  | SUBTOTAL |  |
| ATTENDANT NAME |  |  | TAX |  |
|  |  |  | TOTAL |  |
| GUEST SIGNATURE |  |  | AMOUNT PAID |  |
|  |  |  | AMOUNT DUE |  |

HOTEL NAME

HOTEL ADDRESS, CITY, STATE & ZIP

tel: 321-456-7890 | email: reservations@hotelname.com | web: hotelname.com

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