

# Hotel Receipt

Receipt Number

Hotel Phone Number

Date

Hotel Address

Hotel Name

City, State, ZIP Code

Bill to:

Name

City, State, ZIP Code

Company Name

Country

Hotel Name

Phone Number

Address

Room Number	Price/Night	Number of Nights	Additional Charges	Total
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____

	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
	\$ _____			\$ _____
Payment Method:				Subtotal: \$ _____
Card/Check Number:				Tax: \$ _____
				Total: \$ _____