Tel:
Email:
Website:

|  |  |
| --- | --- |
| **Bill To:** |  |
| **Name** |  |
| **Phone Number:** |  |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **City, State Pin Code** |  |
| **Tel:** | 1-888-123-4567 |
| **Fax:** | 1-888-111-2222 |

Address Line 1

Address line 2

**Hotel Name**

(Add Logo)

**Hotel Invoice**

|  |  |
| --- | --- |
| **Due** |  |
| **Other Charges** |  |
| **Taxes %** |  |
| **Total** |  |

**Thank you for staying with us!**

|  |  |  |  |
| --- | --- | --- | --- |
| **Room Type** | **Number of Nights** | **Nightly Rate** | **Total** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | **Subtotal** | $ |
|  |  | **Late Fees** | $ |
|  |  | **Taxes \_\_\_\_%** | $ |
|  |  | **Total Due** | $ |