

# HOTEL RECEIPT

Receipt Number: \_\_\_\_\_

Date: \_\_\_\_\_

Hotel Name: \_\_\_\_\_

Hotel Phone Number: \_\_\_\_\_

Hotel Street Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

**Bill to:**

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Room Number	Price/Night	# of Nights	Additional Charges	Line Total

Subtotal: \_\_\_\_\_

Sales Tax: \_\_\_\_\_

Total: \_\_\_\_\_

Payment Method: \_\_\_\_\_

Card/Check No. \_\_\_\_\_

