|  |  |  |  |
| --- | --- | --- | --- |
| **Hotel Bill Receipt** | | | |
| Name of the Hotel\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Bill No: [specify an unique number] | |  | |
| Number of hotel rooms booked | |  | |
| Room rate | |  | |
| Room Number | |  | |
| Check in Time and date: | | [specify time in \_\_\_\_\_: \_\_\_\_\_\_pm/am and date in dd-mm-yy] | |
| Check out Time and date: | | [specify time in \_\_\_\_\_: \_\_\_\_\_\_pm/am and date in dd-mm-yy] | |
| Room boarded by: \_\_\_\_\_\_\_\_\_\_ [name of the individual]  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[address of the same]  Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Name of the food  services | Quantity per unit | | Total amount |
|  |  | |  |
| Miscellaneous or other hotel services | Rate of each services | | Total amount |
|  |  | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |
| Percentage of sales tax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [%]  Grand total amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [inclusive of all taxes]  Discount offered: \_\_\_\_\_\_\_\_\_\_[mention if any concession is offered by the hotel authority to the individual] | | | |
| Payment Mode: [mention the mode of payment by which the individual paid off the charges that are incurred for taking the hotel services]   * Cash / Cheque * Debit/ Credit Cards | | | |
| Signature of the hotel in-charge /manager:  Signature of the customer: | | | |
| **----------------THANK YOU FOR YOUR VISIT----------------** | | | |

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