

Hotel Receipt

Hotel Name:

Receipt No.:

Hotel Address:

Date:

Guest Name:

Room No.:

Check-in Date:

Check-out Date:

Description	Qty / Nights	Rate	Total
Room Charge	___	\$___	\$___
Service (e.g., meals, spa)	___	\$___	\$___
Other Charges	___	\$___	\$___

Subtotal	\$___
Tax Type 1 (e.g., GST 5%)	\$___
Tax Type 2 (e.g., State Tax 8%)	\$___
Total Tax	\$___
Grand Total (Including Taxes)	\$___
Amount Paid	\$___
Balance Due	\$___

Payment Method:

Transaction ID:

Authorized by:

Date:

Thank you for staying with us! For questions about this receipt, please contact us at [Hotel Contact].