

Hotel Invoice Format

Hotel Name

Address Line 1

Address Line 2

City, State, ZIP Code

Phone: (XXX) XXX-XXXX

Email: contact@hotelname.com

Invoice No: [Invoice Number]

Invoice Date: [Date]

Guest Name: [Guest Name]

Guest Address: [Guest Address]

Guest Phone: [Guest Phone]

Guest Email: [Guest Email]

Description	Quantity	Unit Price	Total
Room Charge (Room Type - Room No)	[Number of Nights]	[Rate per Night]	[Total Room Charge]
Additional Services (e.g., Spa, Laundry)	[Quantity]	[Rate per Service]	[Total Service Charge]
Food and Beverages	[Quantity]	[Rate per Item]	[Total F&B Charge]

Taxes and Fees			[Taxes and Fees]
Other Charges			[Other Charges]

| **Subtotal** | | | [Subtotal Amount] | | **Discounts** | | | [Discount Amount] | | **Total Amount** |
| | [Total Amount] |

Payment Method: [Payment Method]

Amount Paid: [Amount Paid]

Balance Due: [Balance Due]

Thank you for staying with us!

Terms and Conditions

- 1. Please make payment by the due date.
- 2. Late payments may incur additional fees.
- 3. For any queries, contact our front desk.

Authorized Signature:

[Signature]