

# Hotel Invoice Receipt

**Hotel Name:** Grand Sunshine Hotel

**Address:** 123 Sunset Boulevard, Miami, FL 33101

**Phone:** (305) 123-4567

**Email:** info@grandsunshinehotel.com

## Guest Information:

- **Name:** John Doe
- **Address:** 456 Elm Street, Springfield, IL 62701
- **Phone:** (217) 555-7890
- **Email:** john.doe@example.com

**Invoice Number:** 2024-INV-00123

**Date of Issue:** July 20, 2024

**Reservation Number:** 123456789

## Stay Details:

- **Check-in Date:** July 15, 2024
- **Check-out Date:** July 20, 2024
- **Room Type:** Deluxe Suite
- **Room Rate:** \$200.00 per night

## Charges:

Description	Quantity	Unit Price	Amount
Room Charges	5 nights	\$200.00	\$1,000.00

Room Service	3 orders	\$50.00	\$150.00
Mini Bar	5 items	\$10.00	\$50.00
Laundry Service	2 loads	\$30.00	\$60.00
Spa Service	1 session	\$100.00	\$100.00
Parking Fee	5 days	\$20.00	\$100.00

**Subtotal:** \$1,460.00

**Taxes and Fees (10%):** \$146.00

**Total Amount Due:** \$1,606.00

**Payment Information:**

- **Payment Method:** Credit Card (Visa)
- **Card Number:** \*\*\*\* \* 1234
- **Transaction ID:** ABCD 1234 EFGH 5678

**Notes:** Thank you for choosing Grand Sunshine Hotel. We hope you enjoyed your stay and look forward to welcoming you back soon.

**Signature:**

John Doe

If you need any further assistance, please do not hesitate to contact us.

**Hotel Manager:** Jane Smith

**Signature:**