



HOTEL NAME

Date

Room No :

Arrival :

Departure :

C/I Time :

User Name :

Pax : /

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Receipt No. : 22

DATE	DESCRIPTION	DEBIT	CREDIT
17/01	1 week Accom	10,000.00	
23/01	Cash		-10,000.00

Balance: 0.00

Guest Terms and Conditions Sample 5

1. Check-in time is 1400 Hrs.
2. Check-out time is 1200 Hrs.
3. The guest(s) acknowledge joint and several liability for all services rendered until full settlement of bills.
4. Guest(s) will be held responsible for any loss or damage to hotel property caused by themselves, their friend(s) or any person(s) for whom they are responsible.

Guest Signature