

[HOTEL NAME]

[Street Address]
[City, State, Zip]
[Phone Number]

REFUND INVOICE

Date: [Date]
Refund #: [Refund Number]
Original Invoice #: [Invoice Number]

GUEST DETAILS

[Guest Name]
[Guest Address]
[Email/Phone]

STAY INFORMATION

Confirmation #: [Number]
Check-in: [Date]
Check-out: [Date]

Description	Original Amount	Refund Qty	Refund Total
[Room Charge / Cancellation Fee / Service Deposit]	\$0.00	1	\$0.00
[Taxes/Fees]	\$0.00	1	\$0.00

Subtotal Refund: \$0.00
Tax Refunded: \$0.00

TOTAL REFUND: \$0.00

REFUND METHOD

[Credit Card / Original Payment Method]

Transaction ID: [Reference Number]

If you have any questions concerning this refund, contact [Department/Name] at [Phone].

Thank you for choosing [Hotel Name].