[RESORT NAME]

[Resort Address Line 1]
[City, State, Zip]
[Phone Number]
[Email/Website]

PROFORMA INVOICE

Date: [Date]
Reference: [Booking/PO #]

BILL TO

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

STAY/SERVICE DETAILS

Check-in: [Date]
Check-out: [Date]
Guests: [Adults/Children]
Room/Area: [Name/No.]

Description of Services/Goods	Qty/Days	Unit Price	Amount
[Service Description]	[0]	[0.00]	[0.00]
[Service Description]	[0]	[0.00]	[0.00]
[Service Description]	[0]	[0.00]	[0.00]

Subtotal: [0.00]
Tax ([0]%): [0.00]
Service Charge: [0.00]
TOTAL DUE: [Currency] [0.00]

PAYMENT TERMS & INSTRUCTIONS

Bank: [Bank Name] | Account: [Account Number] | SWIFT/IBAN: [Details]

Note: This is a proforma invoice provided for informational purposes prior to final billing.