**Hotel Pro Forma Invoice Template**

**Company Logo**

|  |  |  |
| --- | --- | --- |
| Hotel Name |  | Hotel Pro Forma Invoice |
| Address | Street, City, ZIP |
| Phone | (000) 000-0000 |
| Email |  |
| Website |  |
| Guest Information |  |  |  |  |
| Name | Name |
| Contact Information | Phone, Email, Address |
| Reservation Number |  |
| Invoice Details |  |  |  |  |
| Pro Forma Invoice Number |  |
| Issuance Date | MM/DD/YY |
| Reservation Dates | MM/DD/YY–MM/DD/YY |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Room Details |  |  |  |  |
| Room Type | Description / Notes | Rate per Night | Number of Nights | Total Room Charge |
| Description | Additional Information | $0.00 | 1 | $0.00 |
|  |  |  |  |  |
|  |  |  |  |  |
|   |  |  |  |  |
| Additional Services |
| Service Description | Rate | Quantity | Total |
|   | $0.00 | 1 |  |
|   |  |  |  |
|   |   |  |  |  |
| Taxes |  |
| Additional Fees |  |
| **Total Amount Due** | **$0.00** |
|  |  |  |  |  |
| Payment Terms | Accepted Payment Methods: [e.g., Credit Card, Cash, Bank Transfer]Deposit Required: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_All payments are due before check-in unless otherwise agreed. |
| Notes or Special Instructions | Insert any special instructions, policies, or additional details here (e.g., “For any changes to your reservation, please contact us at least 48 hours in advance”). |

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