

# Hotel Stay Payment Acknowledgment

Document No: HS-ACK-2024-0012

**Date:**

2024-06-25

**Guest Name:**

John Doe

**Reservation No:**

RES-789456

**Hotel Name:**

Sunrise Grand Hotel

**Hotel Address:**

123 Main Street, City, Country

**Contact:**

+123 456 7890

**Check-in Date:**

2024-06-20

**Check-out Date:**

2024-06-25

**Room Type:**

Deluxe Suite

**Room Number:**

105

**Total Amount Paid:**

\$820.00

**Payment Method:**

Credit Card (Visa)

**Acknowledgment Date:**

2024-06-25

**Payment Description:**

Payment received for above-mentioned stay duration at Sunrise Grand Hotel. This document serves as acknowledgment of payment in full for the services rendered during the stay.

\_\_\_\_\_  
Guest Signature

\_\_\_\_\_  
Hotel Authorized Signature

**Important Notes:**

- This acknowledgment is not a substitute for the original receipt/invoice.
- Ensure all details are accurate before issuing this document.
- Retain a signed copy for both hotel and guest records.
- This document is valid only when signed by both parties.
- For queries, contact the hotel front desk.