

# Itemized Lodging Receipt

## For Reimbursement

<b>Guest Name:</b> John Doe	<b>Hotel Name:</b> City Central Hotel	<b>Receipt No.:</b> 001245
<b>Check-in Date:</b> 2024-05-25	<b>Check-out Date:</b> 2024-05-27	<b>Room Number:</b> 312
<b>Payment Method:</b> Credit Card (VISA)	<b>Company/Organization:</b> ABC Research, Inc.	

Date	Description	Qty/Nights	Rate	Amount
2024-05-25	Room Charge - King Suite	1	\$120.00	\$120.00
2024-05-26	Room Charge - King Suite	1	\$120.00	\$120.00
2024-05-25	City Tax	1	\$9.00	\$9.00
2024-05-25	Tourism Fee	1	\$2.50	\$2.50
2024-05-26	Breakfast	1	\$15.00	\$15.00
2024-05-27	Parking	2	\$8.00	\$16.00
Total				\$282.50

**Prepared by:** Hotel Front Desk  
**Date Issued:** 2024-05-27

- Important Notes:**
- All expenses listed must be actual charges paid and supported by this itemized receipt.
  - Receipts should clearly indicate guest name, hotel details, and period of stay.
  - Personal expenses (e.g., movies, mini-bar, etc.) are not eligible for reimbursement.
  - Handwritten or altered receipts may not be accepted.
  - Contact your organization’s finance department for specific reimbursement guidelines.