

132

09-24-15

Beneditorobertoalvesferreira

Ferreira

Rua Conceicao380apt181 BRB_0184 130100

Folio No.

A/R Number **Group Code** Company

Invoice No.

325816

Membership No. :

Room No. :

303

Arrival Departure :

09-23-15 09-24-15

Conf. No.

67905903

Rate Code: Page No.

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Date		Description		Charges	Credits
09-23-15	*Accommodation	-		119.00	
09-23-15	State Tax			7.14	
09-23-15	County Tax			8.33	
09-24-15	Visa	XXXXXXXXXXXX8780			134.47
09-24-15	Restaurant			12.14	
09-24-15	Visa	XXXXXXXXXXXX8780			12.14
	Life * 1		Total	146.61	146.61
		• • • • • • • • • • • • • • • • • • •	Ralance	0.00	

0.00

Guest Signature:

I have received the goods and / or services in the amount shown heron. I agree that my liablity for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.