

# INVOICE

**Invoice Details:**  
Invoice Number: b9d8a6e9  
Invoice Date: 30-05-2025

**Billed To:**  
Full Name: PRIIT SILLAND  
Check-in Date: 2025-05-26  
Check-out Date: 2025-05-29

**Stay Details:**

Room Type	Nights	Rate (MAD)	Total (MAD)
Single	3	700.00	2100.00
Subtotal:			2100.00 MAD
TAX			MAD 0.00
<b>Total Due:</b>			<b>2100.00 MAD</b>

Client Signature