

# INVOICE



**INVOICE NUMBER**  
4600

**DATE OF ISSUE**  
2021-09-02

## BILL TO

Amanda Adkins  
465 Brian Plaza Suite 324  
North Andre, NE 84124

DATE	DESCRIPTION	AMOUNT
2021-09-02	Guest room	\$180
2021-09-02	Breakfast	\$30
2021-09-02	Dinner	\$70
<b>Subtotal</b>		\$280
<b>Discounts</b>		\$20
<b>Taxes</b>		\$23.1
<b>Total</b>		\$283.1