 **Invoice**

**Cabin in the Woods**

24 Madras Street

Tel: 03 – 0325-036

Fax: 03-22-55-55

Christchurch, 8045

www.cabininthewoods.com

|  |  |
| --- | --- |
| **Bill To:** |  |
| **Name:** | <Name> |
| **Surname:** | <Surname> |
| **Phone:** | <Phone> |

|  |  |  |  |
| --- | --- | --- | --- |
| **Room Type** | **Number of Nights** | **Nightly Rate** | **Total** |
| **<room>** | <nights> | <rate> | <total> |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  | **Subtotal** | $<sub> |
|  |  | **GST** | $<gst> |
|  |  | **Total Due** | $<due> |