## Invocie

Bill To: Korea Travel

Address: Siem Reap, Cambodia Tel: (855)63 964 131-132 Fax: (855)63 964 133

Email:

Date:

26-Feb-16

INVOICE TOTAL

\$

290.00

No.	ARR.	DEPT.	#Folio	Party Name	uest Name/Particular	f Rms./	m. Night	Rate	T	otal Due
1	25-Feb-16	25-Feb-16	214519	VPR0220S28	Meeting Room	16	1	15.00	\$	240.00
2	25-Feb-16	25-Feb-16	214519	VPR0220S28	Extra Charge	1	1	50.00	\$	50.00
		-		200					\$	
Grand Total Amount Due:			A transfer				1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	\$	290.00	

US Dollars Two Hundred and Ninety Only

Payment Condition:

The payments should be made according to our contract, failing to which will invite cancellation of booking without prior notice.

All the bank charges including intermediary bank fees shall be borne by the remitter. 1.5% interest per month shall be charged on overdue accounts.

All payments should be addressed to "Angkor Miracle Resort & Spa " with bank details below:

Bank Name: Canadia Bank Plc.

A/C Name: 008-00-00-06646-3

Bank Address: Siem Reap Branch, Kingdom of Cambodia.

Swift Code: CADIKHPP

Thank you for your support. Please do not hesitate to contact us should you require any clarifications on above billing.

Prepared By Approved By

Ms. Khem Sitha Mr.Miguel Gancayco

Accounts Receivable

Chief Accountant