



10-23-24

Jianping Huang
United StatesFolio No. :
A/R Number :
Group Code :
Company : **Fedrooms**
Membership No. :
Invoice No. :Cashier No. : **53**
Room No. : **306**
Arrival : **10-20-24**
Departure : **10-23-24**
Conf. No. : **86482345**
Rate Code : **IL5FP**
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Date	Description	Charges	Credits
10-20-24	*Room Charge	113.00	
10-20-24	State Tax - Room	8.48	
10-20-24	Occupancy Room Tax	6.78	
10-21-24	*Room Charge	113.00	
10-21-24	State Tax - Room	8.48	
10-21-24	Occupancy Room Tax	6.78	
10-22-24	*Room Charge	113.00	
10-22-24	State Tax - Room	8.48	
10-22-24	Occupancy Room Tax	6.78	
10-23-24	Visa		384.78
Total		384.78	384.78
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown heron. I agree that my liability 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.

Owned by Carolina Hotel LLC & Operated by Atma Hotel Group LLC

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