



OFFICIAL RECEIPT

Arizzo Condominium — Short-Term Stay

Receipt No.: _____
Date Issued: _____
Guest Name: _____
Property: Arizzo Condominium, Davao City
Host: Juden L. Ohman
Status: PAID

STAY DETAILS

#	Check-In	Check-Out	No. of Nights
1			
2			
Total Nights			

PAYMENT RECEIVED

Description	Amount
TOTAL AMOUNT RECEIVED	

Guest Signature over Printed Name

Host Signature — Juden L. Ohman

This serves as official acknowledgment of payment received.
Arizzo Condominium, Davao City