## **Sunset Inn & Suites**

10 First Ave South, Sioux Lookout, Ontario, P8T 1A1, Canada

Phone: 807-737-7177; Fax: 807-373-3586

E-mail: reservations@sunsetinnandsuites.ca; Website: www.sunsetinnandsuites.ca

**Reservation Detail** 

**Reservation No** R-8525 **Check In:** Mar/13/2024 01:00:00 PM

Reservation Date Mar/12/2024 05:56:00 PM Check Out: Mar/15/2024 11:00:00 AM

**Guest Details** 

Guest: Cheryl Suggashie Room Type: K

Canada

**Phone:** 8076329051

**Email:** rcatroppa@nanlegal.on.ca

Payment Details Billing Details

Payment Method: Credit Card Address:

Card Type: Visa

Credit Card No.: 4537-XXXX-XXXX-2499 Phone:

Card Expiry: 10-2029

Name On Card: rachel-

Room Type	Adult/Child/F	Pets Price(CAD)	Tax(CAD)	Total(CAD)
K	2/0/0	350.00	61.32	411.32
Rental Details	Rate Type	Check In Date		Rate(CAD)
	RACK	Mar/13/2024-Mar/13/2024		175.00
	RACK	Mar/14/2024-Mar/14/20	Mar/14/2024-Mar/14/2024	
Discount :	0.00 Other Charge:	0.00 Tax(CAD) 0.00	Total(CAD)	0.00

Tax Detail: Occupancy Tax: 17.52%

Grand Total(CAD): 411.32

**Payment:** 0.00 **Balance:** 411.32

NOTICE TO GUESTS: This property is privately owned and the management reserves the right to refuse service to anyone. Management will not be responsible for accidents or injury to quests or for loss of money, jewelry or valuables of any kind. Management will not be responsible for any item left in the room.

CHECKOUT TIME: 11:00 AM SELF REGISTRATION ONLY

I AGREE that my liability for this bill is not waived and agree to be held personally liable in the event that the person or company failed to pay for any part or full amount of these charges including agree missing/damaged items, etc.. I that if an attorney is retained to collect these charges, I will pay all reasonable attorney's fees and costs incurred. If payment is by credit card you are authorized to charge my account for all charges incurred, including any and all damages/missing items, etc.. I agree that the sole purpose of renting this room is for my own residency only.