

**PROFORMA INVOICE**

21/05/2019

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To : **WORK PERMIT HOLDERS**

ALL TRAVELS MALDIVES

Invoice No : **PRO/WPH/338/2019**

Invoice Date : **21/05/2019**

Ref. No : **FIH/338/2019**

Due Date : **21/05/2019**

Booking No	Voucher No	Period From & To	Details	Room Details	Pax	Days	Rate	Amount USD
192313		24/05/2019 25/05/2019	CHD.CAMRYN ROBERT SALIN / CHD.GALVIN ROBERT SALIN / MR.SALIN ROBERT SAMUEL / MRS.SHEEBA MERLIN SALIN ROBERT	COM / DBL AI	4	1	190.75	190.75
							<b>Total</b>	<b>190.75</b>
							<b>Service Charge-10%</b>	<b>19.08</b>
							<b>Sub Total</b>	<b>209.83</b>
							<b>TGST-12%</b>	<b>25.18</b>
							<b>GreenTax</b>	<b>18.00</b>
							<b>Total Amount</b>	<b>253.00</b>
							<b>Bed Tax</b>	
USD Two Hundred and Fifty Three Only								

Remarks :

**Note : This is not Tax Invoice**

**Note:**

Payment should be made prior to the arrival in order to confirm the booking.

Remittance should be made to "Fihalhohi Island Resort" A/C No. 7730-000102-886 at Bank of Maldives Plc, Male', Republic of Maldives.

Fihalhohi Island Resort

Authorized Signatory