


HOTELSKA ISKAZNICA

BELLEVUE

HOTEL / LOŠINJ

<p>HOTEL BELLEVUE Čikat , 51550 Mali Lošinj Tel: +385 (0)51 661 101</p> <p>Fax:</p> <p>www.losinj-hotels.com</p> <p>E-mail: bellevue@losinj-hotels.com</p>	<p>Ime/ Name/ Name</p> <p>Soba/ Room/ Zimmer</p> <p>Individualno _____</p> <p>Agencija _____</p> <p>Grupa _____</p>
<div data-bbox="274 1140 660 1370"></div> <p>Dobro došli Welcome Willkommen</p>	<p>Puni pansion/ Full board/ Vollpansion Polupansion/ half board/ Halbpansion Noćenje i zajutrak / Bed and breakfast/ Übernachtung mit Frühstück</p> <p>Prvi obrok, dana _____ Z R V</p> <p>Završni obrok, dana _____ Z R V</p> <p>Potpis:</p>

HOTELSKI RAČUN

HOTEL BELLEVUE

Čikat , 51550 Mali Lošinj

Tel: +385 (0)51 661 101, Fax: +385 (0)51 231 904

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RAČUN N^o 2327 INVOICE

IME _____, soba br. _____

Datum dolaska: _____ datum odlaska: _____

Usluge	Broj dana	Broj osoba	Cijena		Iznos u kn
Odrasli:					
Noćenje /zajutak					
Djeca:					
Noćenje /zajutak					
Wellness/Masaže					
Restoran a la carte					
Fitness					
Bellevue spa programi					
Boravišna pristojba Tourist tax					
UKUPNO – TOTAL					
Način plaćanja					

Porezna grupa	Osnovica	Stopa	Porez
Oslobođeno PDV		0%	
PDV 13%		13%	
PDV 25%		25%	
Ukupno:			

Datum: _____ 2017.

Potpis blagajnika:

NAJAVA OBROKA

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Razdoblje: _____ 2017.

broj sobe	Tip sobe	broj osoba	Zajutrak	Ručak	Večera
101					
102					
103					
104					
105					
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107					
110					
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PRIJAM REZERVACIJE

HOTEL BELLEVUE

Čikat , 51550 Mali Lošinj

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Prijam rezervacije

Za dan _____

Za gosta _____

Broj osoba i vrste soba _____

Cijena i vrsta aranžmana _____

Plaćanje _____

Napomena _____

Datum: _____

Rezervaciju primio: _____

RECEPCIJSKI LIST

HOTEL BELLEVUE

Čikat , 51550 Mali Lošinj

Tel: +385 (0)51 661 101, Fax: +385 (0)51 231 904

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Dolazak i odlazak gostiju za dan _____, 2017.

broj sobe	Tip sobe	prezime i ime	broj osoba	PU ZU	država	odlazak	Grupa
		PRVI KAT					
101	SUPERIOR ATRIUM						
102	SUPERIOR ATRIUM						
103	SUPERIOR ATRIUM						
104	SUPERIOR ATRIUM						
105	SUPERIOR ATRIUM						
106	SUPERIOR PARK SIDE						
107	SUPERIOR PARK SIDE						
110	SUPERIOR PARK SIDE						
111	SUPERIOR SEA SIDE						
112	SUPERIOR SEA SIDE						
113	SUPERIOR SEA SIDE						
115	SUPERIOR SEA SIDE						
116	SUPERIOR SEA SIDE						
117	SUPERIOR SEA SIDE						
118	SUPERIOR SEA SIDE						
		DRUGI KAT					
201	DELUXE PARK SIDE						
202	DELUXE PARK SIDE						
203	DELUXE PARK SIDE						
204	DELUXE PARK SIDE						
205	DELUXE PARK SIDE						
206	DELUXE SEA SIDE						
207	DELUXE SEA SIDE						
208	DELUXE SEA SIDE						
209	DELUXE SEA SIDE						
210	DELUXE SEA SIDE						

211	JUNIOR SUITE PARK SIDE						
212	JUNIOR SUITE PARK SIDE						
213	JUNIOR SUITE PARK SIDE						
214	JUNIOR SUITE SEA SIDE						
		TREĆI KAT					
301	EXECUTIVE SUITE						
302	EXECUTIVE SUITE						
303	EXECUTIVE SUITE						
304	EXECUTIVE SUITE						
305	BELLEVUE SUITE						
306	BELLEVUE SUITE						
307	BELLEVUE SUITE						
308	LUXURY SUITE						
309	LUXURY SUITE						
310	LUXURY SUITE						
311	LUXURY SUITE						

REGISTRACIJSKI LIST

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HOTEL				
PREZIME: SURNAME		IME: FIRST NAME		
ADRESA:				
FULL ADDRESS NAZIV TVRTKE				
COMPANY NAME				
DOLAZAK		ODLAZAK		
ARRIVAL DATE		DEPARTURE DATE		
PLAĆANJE	<input type="checkbox"/>	GOTOVINOM/CASH	<input type="checkbox"/>	VISA
PAYMENT BY	<input type="checkbox"/>	AMERICAN EXPRESS	<input type="checkbox"/>	EUROCARD
	<input type="checkbox"/>	DINER'S CLUB	<input type="checkbox"/>	OSTALO/OTHER
NOĆENJE/ACCOMMODATION <input type="checkbox"/> PANSION /FULLBOARD <input type="checkbox"/> POLUPANSION/HALFBOARD <input type="checkbox"/>				
ROOM No	PERS	RATE	SIGNATURE	CLERK