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**PRO-FORMA INVOICE:**

Guest/Group Name: BC D TRAVEL  
Address: 10141,00100 - NBI  
Contacts: LYDIA MANGA

Date: 17-Dec-18  
Pin No: XXXXXXXXXX  
Vat No: XXXXXXXXXX

**Contact Person Details:**

Name: LYDIA MANGA  
Address: 1,014,100,100  
Cell Phone: 7400047608  
Email Address: [lydia.manga@bcdtravel.co.ke](mailto:lydia.manga@bcdtravel.co.ke)

|           | Description   | PAX | NO.OF NGT | RATE         | TOTAL         |
|-----------|---------------|-----|-----------|--------------|---------------|
| 21-Dec-18 | 3 TWIN ROOM   | 6   | 1         | KES 7,000.00 | KES 21,000.00 |
|           | 1 SINGLE ROOM | 1   | 1         | KES 5,500.00 | KES 5,500.00  |

|           |               |
|-----------|---------------|
| Sub Total | KES 26,500.00 |
| VAT       | -             |
| Total     | KES 26,500.00 |

This invoice Includes all taxes:

**PAYMENT DETAILS:**

Thomson Falls Estates LTD  
Cooperative Bank  
Account No:01136036083700,Nyahururu  
Swift Code:KCOOKENA

**Declaration:**

All invoices are due for payment within 1 MONTH.  
Please note that overdue invoices may hamper extension of credit for future bookings.