Group Check-Out Summary Sheet

Group Name					
Check-Out Date					
Group Leader / Contact	Person				
Number of Rooms					
Number of Guests					
Company/Organization					
Room Details					
Room Number	Guest Name		Check-Out Time		Remarks
Outstanding B	Balances				
Description		Amount		Status	
Special Notes / Follow-u	ıp Needed				
	-F				
Checked By					
Date					
Date					