

## Tax Invoice

		Net Tot	10 A 1						0.00
			240.00		240.00	4480.00			
	Total:	4000.00		240.00		240.00	4400		
13-Feb-23	13-Feb-23 9903 M		Tariff		6%	240.00	6%	240.00	4480.00
13-Feb 23	13-Feb-23 996311				Rate	Amount	Rate	Amount	Amount
Date	SAC (S Accountir		Description			GST C		GST	Total
	harmen filmen for a start of a st	and the second			.023	09.3	4		1
13-Feb-2023		20.30		14-Feb-2023		09.34		No.of Days	
Check-in Date		Check-in Time		Check-out Date		Check-out Time No. of David			
Mr.VIKAS Mr.AWAN	KUMAR ISH KUMA	R				Cucot			
Malana	Guest Details								
			Origi	nal for Reci	pient	Continental	rian		
everse Charge Invoice				Meal Plan		Continental Plan			
Place of Supply		Chakan Pune		Nationality		2 (Adult: 2, Child: 0, Extra Person: 0) Indian			
State Code		27		Number of Guests					
State Initial				Room Type		COZ			
Website				Room No.		107			
Email ID				Reg/ GRC Number		858			
Contact Details				Booking ID					
Supplier's PAN Number		BJFPK6140L		OTA's Name		972			
Supplier's CIN Number				Invoice Num		27AAOCA7042D1ZQ			
Supplier's GSTIN		27BJFPK6140L2ZZ		Company's GSTIN		Maharashtra			
		Kharab Wadi Chakan, Talegaon Chakan 410501				1st Floor, Office No. 103, Mayfair Tower, Wakdewadi, Shivajinagar Pune . Pune 41100			
ddress of the Supplier		Next to Mahadevi Petrol Depot,		Company's Address				100	
ame of the Supplier		Masara Biznotel		Company's Name		Mr Ariston Group India Private Limited			
ma of the Si	Innline	Manager	D:						14-Feb-202

Amount in Words: Rupees Four Thousand Four Hundred and Eighty only. Paymode: Company

I agree I'm liable for the payment of the above statement if the person, company or Association indicated by me as being responsible for payment of the same does not do so.

Authorised Signatory For Masara Biznotel Chakan

Four

ABIZA 0 PUNE MA. 410501 CHAKAN

Guest Signature