

**Tax Invoice**

**Restaurant & Hotel Meera**

GSTIN 22AEQPP8957F1ZY

M G Road, Raipur, Chhattisgarh, 492001, India

Phone 91-771-4080087, E-Mail info@hotelmeera.in URL www.hotelmeera.in

Bill No. : 26020	Date of Invoice : 12-Apr-23
Guest Name : Mr. Aradhya Naidu	G.R. Card No : REG26759
Bill To : Aradhya Naidu	Room No. : 213
Address :	No. of Person : 1 (A) / 0 (C)
State :	No. of Nights : 2
GSTIN :	Date of Arrival : 10-Apr-23 11 44 12 AM
Source of Supply : Raipur	Date of Departure : 12-Apr-23 6 48 27 AM
	Source :

Sr No	Description	HSN/SAC	Qty	Rate	Total	Discount	Taxable	SGST	CGST	IGST	CESS
1	Room Rent	996311	2	999.00	1,998.00	199.80	1,798.20	107.89	107.89	0.00	0.00
								6.00 %	6.00 %	0.00 %	0.00 %
2	Outlet [ Saffron Restaurant ] Check No [ 125388 ]	996332	1	31.50	31.50	0.00	31.50	0.00	0.00	0.00	0.00
								0.00 %	0.00 %	0.00 %	0.00 %
	<b>Total</b>				2,029.50	199.80	1,829.70	107.89	107.89	0.00	0.00

**Total Payable Amount**

Rs Two Thousand Forty-Five And Fifty

<b>Total Charge</b>	1,829.70
<b>SGST</b>	107.89
<b>CGST</b>	107.89

Taxable	Central Tax		State Tax		Total Tax Amount
	Rate	Amount	Rate	Amount	
31.50	0.0 %	0.00	0.0 %	0.00	0.00
1798.20	6.0 %	107.89	6.0 %	107.89	215.78
<b>Total</b>		<b>107.89</b>		<b>107.89</b>	<b>215.78</b>

<b>Grand Total Charge</b>	2,045.48
<b>Flat Discount</b>	0.00
<b>Adjustment</b>	0.02
<b>Total Payable</b>	2,045.50
<b>Total Payment</b>	2,045.50
<b>Balance</b>	0.00

Payment Date	Description	Amount
11-Apr-23	CARD PAYMENT - Payment Dt-10 04 23	2,000.00
12-Apr-23	CASH	45.50
	<b>Total</b>	2,045.50

Remark :

This Folio is in : Rs  
 Reception (C/I) : RANU  
 Cashier (C/O) : BHAJIDRA  
 Date : 12-Apr-23  
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**NOTICE TO GUESTS:** This property is privately owned and the management reserves the right to refuse service to anyone. Management will not be responsible for accidents or injury to guests or for loss of money, jewelry or valuables of any kind. Management will not be responsible for any item left in the room.

**CHECKOUT TIME 11:00 AM SELF REGISTRATION ONLY**  
 I AGREE that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person or company failed to pay for any part or full amount of these charges including any missing/damaged items, etc. I agree that if an attorney is retained to collect these charges, I will pay all reasonable attorney's fees and costs incurred. If payment is by credit card you are authorized to charge my account for all charges incurred, including any and all damages/missing items, etc. I agree that the sole purpose of renting this room is for my own residency only.