

TAX INVOICE

Invoice Date

: 08/06/2023

**Guest Name** 

MR ANAND JOGADE

GSTN BIII No

: F0681BIL24002305

Second Guest Name

Room No

: 600 Adult: 1

Company Name

ARISTON GROUP INDIA PRIVATE LIMITED

**GSTN Number** 

: 07AAOCA7042D1ZS

Address

Integrated Supply Chain Solutions, EnterpriseRice Mill Compound Khasara No 911, Village thala,

Arrival Date

07/06/2023 15.41 Departure Date

: 08/06/2023

Date	Ref No	Description	GSTN SAC#	Amount
07/06/2023	THE THE	Tariff	996311	4,000.00
07/06/2023		CGST @ 6.00%		240.00
07/06/2023		SGST @ 6.00%		240.00
07/06/2023	2249	BON APPETIT	996331	2,344.74
07/06/2023		CGST @ 2.50%		58.63
07/06/2023		SGST @ 2.50%		58.63
01/00/2023	2240	5551 @ 2.5570	07/06/23 Total:	6,942.00
		, A	Net Amount:	6,942.00
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Advance

0.00 **Bill Amount**  6,942.00

**Balance Amount** 

6,942.00

In Words:

Rupees Six Thousand Nine Hundred Forty-Two Only

**UPI** Payment



Settlement Details:

Terms And Condition:

PLEASE DEPOSIT YOUR ROOM KEY CARD

Check Out by

I agree that my liability for this bill is not waived & agree to be held personally liable in the event that the indicated person by fails to pay for any part of the full amount of these charges. I also agree that all the charges contained in this account are correct.

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We understand your world do

HOTEL CITY PARK HOTEL CITYPARKKPPOORVI

NEW DELHI DATE: 08/06/2023

ROC: 001/85

MID: BATCH NO: 000249 INVOICE: 001789

SALE

CARD TYPE:Visa Credit EXP:XX/XX CARD NO:4501\*\*\*\*\*\*\*\*\*5018 Chira AUTH CODE:796/54 RRN:000000001/89; TVR:0080048000 T51:F800 A1D:A0000000031010 TC:DB/904411F50F2D1

TOTAL AMOUNT SALE AMOUNT INR 6942.00

> PIN VERIFIED OK SIGNATURE NOT REQUIRED

ANAND JOGADE kI am satisfied with goods/services received and agree to pay as per issuer agreement.

\*\*CUSTOMER COPY\*\* \*Thank You Visit Again\*

App Version : 02.03.08

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mail : sales@cityparkhotel.in • www.cityparkhotel.in .: 07AAACE1983H2ZN, <u>fssat</u> No.13316005000500

Pitam Pura, New Delhi-1 (A Unit of Estates T