



## Hotel Park Horizon

CP 2 IPIA ROAD NO.4 Adjoining BEST PRICE, Jhalawar Road, Kota, Rajasthan, 324005, India  
 Phone: 0744-2430888 ; E-Mail: stayatparkhorizon@gmail.com  
 URL: www.hotelparkhorizon.com ; GSTIN: 08AFWPB4628N1ZT

### Invoice

**Folio No.** : 23/24-2126  
**Guest Name** : Mr. VALESH SHARMA .  
**Address** : A 174 BARKAT NAGAR TONK  
 JAPUR RAJASTHAN  
 India  
**Nationality** : Indian  
**Source** : GOIBIBO

**G.R. Card No** 23/24-1544  
**Room No.** : 109  
**Tariff** : 2,804.46  
**Rate Type** : CP  
**No. of Person** : 1 (A) / 0 (C)  
**Date of Arrival** : 16-10-2023 05:09:10 PM  
**Date of Departure** : 17-10-2023 05:09:06 PM

Date	Ref.No.	HSN/SAC	Particular	Debit	Credit
16-10-2023		996332	Outlet [ WOODS RESTAURANT ] Check No [ R 23/24-15237 ]	73.50	
16-10-2023		996332	Outlet [ WOODS RESTAURANT ] Check No [ R 23/24-15267 ]	429.00	
Total				502.50	0.00
				Total Charges :	502.50
				Total Charges	-0.50
				Discount :	
				Total :	503.00
				Payment :	0.00
				Balance :	503.00

Item Name	Rate	Qty	Amount
COLD COFFEE WITH IC	120.00	1	120.00
MASALA DOSA	150.00	1	150.00
PACKED DRINKING WATE	19.05	1	19.05
Total :			289.05
CGST 2.5% on 289.05 :			7.23
SGST 2.5% on 289.05 :			7.23
Net Total :			304.00
Rs. THREE HUNDRED FOUR ONLY			

Remark :

807.00

**This Folio is in** : Rs  
**Bill To** : VALESH SHARMA .  
**Address** : A 174 BARKAT NAGAR TONK JAPUR  
 RAJASTHAN , India

**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.

**GSTIN** :  
**Reception (C/I)** : MR. SANJAY  
**Cashier (C/O)** :  
**Date** : 17-10-2023  
**Page** : Page 1 of 1

**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.

( Guest Signature )