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

Bill No. **Guest Name** : 23/24-3024

: Mr. Valesh Sharma C/O GOIBIBO

Address

: A-174 BARKAT NAGAR TONK PHATAK JAIPUR

JAIPUR

RAJSTHAN India 302015

Nationality Source

: Indian : GOIBIBO G.R. Card No

23/24-2253

Room No.

: 309

Tariff Rate Type : 2,025.00 : EP SINGLE

: 1 (A) / 0 (C)

No. of Person

: 24-01-2024

07:33:42 PM

Date of Arrival

11:21:29 AM Date of Departure : 25-01-2024

Date	Ref.No.	HSN/SAC	Particular	Debit	Credit
24-01-2024	ı	996311	Tariff (Room Type :Business) (Room No. : 309) (Rate Type : EP SINGLE)	2,025.00	
24-01-2024	1	996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-23218]	467.25	
24-01-2024	1	996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-23225]	30.00	
24-01-2024	1	996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-23228]	136.50	
24-01-2024	l .	996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-23254]	241.50	
25-01-2024		996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-23264]	30.00	
25-01-2024 23/24-3937			CENTRAL BANK OF INDIA		905.00
25-01-2024	l.		Goibibo		2,268.00
			Total	2,930.25	3,173.00
			=======================================		
				Total Charges:	2,930.25
				Total Charges Discount :	0.25
				Total SGST:	. 121.50
				Total CGST:	121.50
				Total :	3,173.00
				Payment :	3,173.00
				Balance :	0.00
				=========	

Remark

This Folio is in

Bill To

; Valesh Sharma C/O GOIBIBO

Address

: A-174 BARKAT NAGAR TONK PHATAK

JAIPUR JAIPUR, RAJSTHAN, India

GSTIN

Reception (C/I) Cashier (C/O)

: MR. SANJAY : MR. DHAVAL JAIN

Date Page

: 25-01-2024 : Page 1 of 1

Management will not be responsible for any item left in the room. CHECKOUT TIME: 11:00 AM SELF REGISTRATION ONLY

the right to refuse service to anyone

jewelry or valuables of any kind.

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 agreee 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

NOTICE TO GUESTS: This property is privately owned and the management reserves

Management will not be responsible for accidents or injury to guests or for loss of money,

purpose of renting this room is for my own residency only.

(Guest Signature)