

## TAX INVOICE



**A UNIT OF H S AND COMPANY**  
**HANUMANGARH ROAD, NEAR RIICO FLYOVER, SGNR**  
**PH: 8094473666**

Email:-udgrand@gmail.com

GSTIN:08ANJPS9337C1ZN

**Invoice No.:** 24-25/MB-00574      **Folio :** 518      **Reg. No. :** 522      **Invoice Date :** 17/07/2024

**Room No(s) :** 210      **Arrival Date :** 16/07/2024  
**Guest Name :** Mr. VALESH SHARMA      **Arrival Time :** 19:26  
**Company :** WALK-IN      **Departure Date :** 17/07/2024  
**Address :** JAIPUR      **Departure Time :** 09:13:14  
**No. of Persons :** 1+ 0

**Party's GSTIN :**      **Place of Service :** RAJASTHAN

Date	V.No.	Room	Description	HSN/SAC Code	Debit	Credit	Balance
16/07		0 210	Room Charges #210 on EP	996311	3000.00		3000.00
16/07		0 210	Extra Person #210 on EP	996311	1.00		3001.00
16/07		0 210	CGST(R)@ 6.00% #210		180.06		3181.06
16/07		0 210	SGST(R)@ 6.00% #210		180.06		3361.12
16/07	1246	210	RESTAURANT	996331	433.00		3794.12
16/07	1250	210	RESTAURANT	996331	823.00		4617.12
Rs. Four Thousand Six Hundred Seventeen & paise Twelve only						<b>Net Amount</b>	4617.12
17/07	24-25/JV	210				0.12	4617.00
17/07	RN546	210	STATE BANK OF INDIA			3360.00	1257.00
17/07	RN547	210	STATE BANK OF INDIA			1257.00	

HSN/SAC Code	Account Description	Tax Rate	Taxable Amount	CGST Amount	SGST Amount	VAT Amount	Total Amount
996311	ROOM RENT 12%	12.0	3001.00	180.06	180.06	0.00	3361.12
996331	FOOD SALE	5.0	1101.00	27.56	27.56	0.00	1156.12
	BEVERAGE SALE EXEMPTED	0.0	100.00	0.00	0.00	0.00	100.00
Grand Total			4202.00	207.62	207.62	0.00	4617.24

**Terms & Conditions**

This property E&OE is privately owned and the management reserves the right to refuse service to anyone. Management will not be responsible for accidents or injury to guest or for accidents or loss of money jewellery or valuables of any kind.

Management will not be responsible for any item left in the room.

BANK DETAIL:- STATE BANK OF INDIA,

A/C NO.39858116921,IFSC CODE: SBIN0015990,

For UD GRAND HOTEL AND RESORTS  
A UNIT OF H S AND COMPANY

MANISH

Bill verified & recommended for payment. I agree to be held personally liable for payment of this bill regardless of charges & Instructions

Guest Copy

Guest Signature

Pg.1/ 1

**Notice To Guest:-**