

Family Garden Restro
 Opp. Samntavihar Colony, Titrdi, Ambamata Ghati, Udaipur (Rajasthan)

Name: TO 2 Bill No.: **757**
 Date: _____

S.N.	PARTICULARS	QTY.	RATE	AMOUNT
	Dus. Tandoori	1		100
	Mix Rajiety	1		90
	M. Kachori	1		120
	Two Rotis B.	6	22.5	135
	(7) Aata	1	20	20
				<u>465</u>

Rupees Total

Subject to Udaipur Jurisdiction Signature

Invoice

Bill No. :
 Guest Name : VALESH SHARMA C/O GOIBIBO
 Address : C 83 JAWAHAR COLONY
 JHALAWAR
 India
 Nationality : Indian
 Source : GOIBIBO

G.R. Card No : 23/24-2928
 Room No. : 302
 Tariff : 2,676.79
 Rate Type : EP
 No. of Person : 2 (A) / 0 (C)
 Date of Arrival : 26-08-2024 08:01:09 PM
 Date of Departure : 27-08-2024 10:58:05 AM

Date	Ref.No.	HSN/SAC	Particular	Debit	Credit
26-08-2024		996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-30244]	351.75	
26-08-2024		996332	Outlet [WOODS RESTAURANT] Check No [R 23/24-30240]	661.50	
27-08-2024	38		AU SMALL (CARD)		1,014.00
Total				1,013.25	1,014.00
				Total Charges :	1,013.25
				Total Charges	-0.75
				Discount :	
				Total :	1,014.00
				Payment :	1,014.00
				Balance :	0.00

Remark :

This Folio is in : Rs
 Bill To : VALESH SHARMA C/O GOIBIBO
 Address : C 83 JAWAHAR COLONY JHALAWAR , 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. DHAVAL JAIN
 Cashier (C/O) : MR. DHAVAL JAIN
 Date : 27-08-2024
 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)