GSTIN: 09AALP15013J1ZO TAX INVOICE BILL NO: 235

**HOTEL RIZ**

S – 19/32 B, NADESAR, VARANASI – UTTAR PRADESH 221002 MOBILE: 9794907109

**Guest Name: ………………….…………………………………………………………………………………….…………..**

**Address: …….……………………………………………………………………………………………………………………..**

**Mobile: ………………………..……. No. Of Person: ……………. Room No.…...............**

|  |  |
| --- | --- |
| Arrival Date & Time: |  |
| Departure Date & Time: |  |
| Room no: |  |
| Room Tariff: |  |
| Total Days: |  |
| Amount: |  |
| CGST @ 6 %: |  |
| SGST@ 6 %: |  |
| SERVICE TAX @ 5%: |  |
| Total: |  |
| Advance: |  |
| Balance: |  |
| Cash Received: |  |

E. & O. E. For: HOTEL RIZ

Customer’s Sign Auth. Signature