

# COPY OF INVOICE

**PERCEPT LIMITED**

3rd Floor, 10/76, Apte Chawl Committee, LR Papan  
marg  
3rd Floor, 10/76, Apte Chawl Committee, LR Papan  
marg  
Mumbai MH 400018

Guest Name : Mr . PERCEPT LIMITED

Travel Agent :

Company : PERCEPT LIMITED

GSTIN ID : 27AACCP5602Q1Z2

Billing : Event dtd- 15.10.25

Bill No. : 244540

Page : 1 of 1

Room No. : 9015

Rate : 0 INR

Guests : 0

Arrival : 15-OCT-25 04:52:00

Departure : 17-OCT-25 18:08:00

Printed By / On : SRIJA 17-OCT-25 18:09:45

Membership :

Confirmation No : 23603440

State :

Date	Description	Reference	Debit	Credit
15-10-25	Deposit Transfer at Check-In	HDFCH00546938593		20,880.00
15-10-25	Banquet Food LCH	Room# 9056 : CHECK# 2167 [1]	27,000.00	
15-10-25	Banquet - CGST 9%	Room# 9056 : CHECK# 2167 [1]	2,430.00	
15-10-25	Banquet - SGST 9%	Room# 9056 : CHECK# 2167 [1]	2,430.00	
17-10-25	Bank Transfer City Ledger	HDFCH00556005697		10,440.00
17-10-25	AR - TDS			540.00
			Total INR	31,860.00 31,860.00
			Balance INR	0.00

HSN/SAC CODE	SALES	CGST TAX	SGST TAX	IGST TAX	CESS TAX	CESS TAX 2	VAT
996334	27,000.00	2,430.00	2,430.00	0.00	0.00	0.00	0.00

I agree that I am personally liable for the payment of the foregoing statement and if the person, company or association indicated by me as being responsible for the payment of the same does not do so, that my liability for such payments shall be joint and several with such person, company or association. All disputes subject to Maharashtra jurisdiction.

Cashier \_\_\_\_\_

Guest Signature \_\_\_\_\_

Checkout By: Srika Medda

**CROWNE PLAZA PUNE CITY CENTRE**

C.T.S. No. 37 & 37/1, Bund Garden Road

Next to Jehangir Hospital, Pune 411001, Maharashtra, India

Tel: 91 20 6724 8181 Fax: 91 20 6724 8383

Email: dm@crowneplazapune.com Web: www.ihg.com

PAN No. : AACCC3060B ; Service Tax No. : AACCC3060BSD002 ; TIN No. : 27230641331V ; Luxury Tax No. : 27230641331L