**Employee Name - AMAN SOLANKI** 

Employee Contact - 8982680697

Company Name - NOVARTIS HEALTHCARE PVT LTD

**Date -** 21-Sep-2025

Dear AMAN SOLANKI,

With reference to your request number UID No 05092516557578. { 10-Sep-2025 }, we are pleased to provide a suitable quotation for your meeting request as per the elements detailed below:

DELIVERY DATE	10-Sep-2025	DELIVERY TIME	13:00:00
MEETING GUEST COUNT - VEG	0	MEETING GUEST COUNT - NON VEG	20
MEETING VENUE	SHALBY HOSPITAL, INDORE	MEETING CITY	INDORE
MEETING SUBJECT	f2f meeting	SEATING STYLE	CLUSTER

PERCEPT	GUEST COUNT / UNIT	PER PERSON UNIT COST	GST	TOTAL PER PERSON UNIT COST	TOTAL COST INCLUDING GST	
BUSINESS LUNCH BOX - FOOD	20	1100.00	55.00	1155.00	23100.00	
BANQUET		0	0	0	0	
NET TOTAL		23100.00				
AGENCY MANAGEMENT CHARGES		1848.00				
TOTAL BILLING		24948.00				
GST(18%)		4491.00				
TOTAL GROSS BILLING		29439.00				

Kindly note that the quotation provided is for budgetary purposes only. The final invoice will be based on actual consumption and the confirmed guest count.

In the meantime, we request you to please do update the Shopping cart OR Purchase Order No on Hotel-Meeting Requisition Request.

Should you have any questions or need further clarification, please feel free to reach out Mr Sanchit 9930902119 / Ms Priyanka 9096860622 , will be happy to assist for any further queries.

Thank you for your continuous support and cooperation