

Employee Name - M G ARVIND

Employee Contact - 9895244114

Company Name - NOVARTIS HEALTHCARE PVT LTD

Date - 12-Jan-2026

Dear M G ARVIND,

With reference to your request number UID No 07012616426904. { 09-Jan-2026 }, we are pleased to provide a suitable quotation for your meeting request as per the elements detailed below:

Meeting Category	HOTEL MEETING	Meeting City	THIRUVANANTHAPURAM
Meeting Guest Count	25	Cvent No	MTNZFGJSFTL
Meeting Type	Business Dinner	Meeting Subject	HUB AND SPOKE
Meeting Seating Style	CLUSTER	Meeting Final Tax Invoice	Bill Value

Residency Tower	83085
-----------------	-------

HOTEL MEETING (MIN 0 pax guarantee)		Residency Tower			
ELEMENTS	QUANTITY	PER PERSON UNIT COST	GST	TOTAL PER PERSON UNIT COST	TOTAL COST INCLUDING GST
BUSINESS DINNER	25.00	1850.00	333.00	2183.00	54575.00
BANQUET		5000.00	900.00	5900.00	5900.00
LEASE LINE INTERNET	1.00	4000.00	720.00	4720.00	4720.00
NET TOTAL		65195.00			
AGENCY MANAGEMENT CHARGES		5216.00			
TOTAL BILLING		70411.00			
GST(18%)		12674.00			
TOTAL GROSS BILLING		83085.00			

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