



This e-mail is for informational purposes only. Please do not reply as this e-mail address is not enabled for the reception of messages and is not monitored by the administrator.

Dear:

Your booking has been confirmed with the following information:

- **Hotel:** Hotsson
- **Name:**
- **Travel Companions:**
- **Check-In Date:** 19/10/2020
- **Check-Out Date:** 26/10/2020
- **Room type:** Single (1 person)
- **Beds:** 1
- **Check-In Time:** 15:00 hrs
- **Check-Out Time:** 12:00 hrs

The booking will be under your name.

Payment:

- The charge to your credit card for the equivalent of 2 nights in order to ensure your room will be available has been made; the rest must be paid upon arrival to the hotel. If you require to make the payment before your arrival to the hotel, please send email to avargas@intermeeting.com.mx
- A card will be requested as a warranty for any additional expenses made during your stay.

Online Invoice

Ticket #: A0EBD2ED-41C8-4493-84C5-73D385A8CF08

- The invoicing ticket is valid within 15 days after being issued.
- To issue you invoice [click here](https://www.fel.mx/CFDI33/Presentacion/Ticket/FacturarTicket.aspx) or please enter the following link: <https://www.fel.mx/CFDI33/Presentacion/Ticket/FacturarTicket.aspx>
- To see the the invoicing instructions please [click here](#)

Terms and Conditions

Rates include current applicable taxes

In case there should be any change in taxes, these should be covered by the guest.

Change and Cancellation Policy

- Deadline for changes o cancellation July 18th. After this date, an extra fee of 2 nights will be applied as a penalty.
- Any changes or cancellations must be notified in writing to: avargas@intermeeting.com.mx. Cancellations over the phone or done directly with the hotel will not be accepted.
- All changes are subject to availability.
- Early check-out:** All early checkouts which weren't notified at the moment of registration at the hotel will generate a fee of 2 nights as penalty.

Additional Information

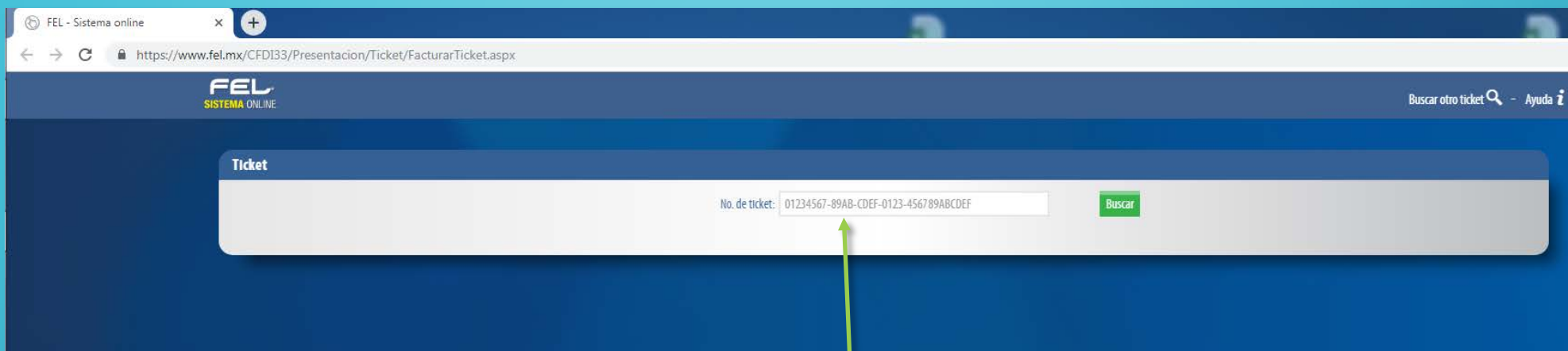
Step

1

Enter the following link:

<https://www.fel.mx/CFDI33/Presentacion/Ticket/FacturarTicket.aspx>

or in the mail give "click here"



Step
2

Write or copy the ticket number receive for mail and give click to the search button.

Descripción de artículos

Número de identificación	Cantidad	Unidad	Descripción	Precio unitario	Importe
	1	Servicio	ASOCIACIONES DE MEDICOS, Inscripción al Congreso Internacional AMECRA 2019, Dr. Daniel López López	1500	1500

Número de artículos: 1

Importe total: 1500.00

Receptor

* RFC: AAAA010203AAA

Buscar

* Razón social: Ingrese su razón social

* Uso del CFDI: Sin selección ▼

País: Sin Seleccionar ▼

Municipio: Sin Seleccionar ▼

Colonia: Sin Seleccionar ▼

No. exterior: Número exterior

☐ Incluir domicilio en PDF

Residencia fiscal: Sin selección ▼

Código postal: 12345

Localidad: Sin Seleccionar ▼

Calle: Nombre de la calle

No. Interior: Número Interior

Número de registro: Numero registro de identidad

Estado: Sin Seleccionar ▼

Referencia: Referencia del domicilio

Vista previa

Emitir

- SEARCH -
Only if you have
previously billed in FEL.

Paso

3

Enter the information requested in the form, click on
"Issue" to stamp the invoice and send it by email.
Note: Fields with * are required

- IMPORTANT -
Only fill these Fields in case of
being a foreign person or
Company.

- PREVIEW INVOICE -