



CAFE PONTALBA
546 Saint Peters St.
New Orleans, LA 70116
(504)-522-1180

Date: Mar 17 '19 07:43PM

Card Type: MasterCard

Acct #: XXXXXXXXXXXXX4990

Card Entry: SHIPPED

Trans Type: PURCHASE

Auth Code: 010530

Check: 4420

Table: 31/1

Server: 202 Michael

Subtotal: 21.48

Add Gratuity: 3.00

Total: 24.48

Merchant: 34234

Terminal ID: 1

***** Purchase *****

Card #: *****4990 C

Exp Date: **/**

Response Code: 00

App Label: DEBIT MASTERCARD

Mode: Issuer

AID: A0000000041010

TVR: 0000008000

TSI: E800

IAD: 03106070052408001D57

ARC: 00

00 Approved - Thank You 000

Signature:

Comments:

0195a Table 22 #Party 1
BRITANY T Svrck: 25 6:46p 03/18/19
SERVER LEFT
Separate checks: 3-of-8

1 FROG WINGS 12.50
1 RACK OF RIBS 29.50
2 NIGHT ON THE TOW 24.00

Sub Total: 66.00
Tax: 6.91
Sub Total: 72.91
03/18 7:46p TOTAL: 72.91

Suggested Gratuity
18%GRATUITY 11.88
20%GRATUITY 13.20

*** THANK YOU ***
FOR DINING WITH US.

424 BOURBON ST.
NEW ORLEANS LA 70130

*** Customer Cop

RECEIPT



AIRPORT SHUTTLE

FOR RESERVATIONS CALL
24 HOURS IN ADVANCE:

504-522-3500

RECEIPT

NON-REFUNDABLE

NOT RESPONSIBLE FOR LOST
OR STOLEN TICKETS

Reservation #: 5003629

03/17/19 02:45 PM
drome

TO/FROM: Astor Crowne Plaza
739 Canal St. (Main Entrance)

PAX: 1/0 FARE: \$44.00 (C)

FERNANDEZ, CARLA

5003629

ROUTE: 1

You are scheduled to be picked up at
the: Astor Crowne Plaza

Your reservation number is: 5003630

* Airport Shuttle New Orleans will not
be responsible or liable for:

* Lost, Stolen or damaged items and
baggage or vehicles parked at any of
our locations. Acts of God or nature,
delays in traffic or flight plans.

* Notice: Baggage Liability

* This motor carrier is not liable for
loss or damage to properly identified
baggage in an amount exceeding
\$1,000.00.

Identify Your Baggage

Under FMCSA regulations, all baggage
must be properly identified. Luggage
tags should indicate clearly the name
and address to which lost baggage
should be forwarded. Free luggage
tags are available at all ticket windows
and baggage counters.

Customers Signature:

0195

Server: BRITTANY T

03/18/19 20:06, Swiped T: 22 Term: 4

Rec:132

PIER 424

435 BOURBON STREET
NEW ORLEANS LA 70130

()

CARD TYPE ACCOUNT NUMBER
MASTER CARD XXXXXXXXXXXX4990
Name: KARLA FERNANDEZ SANCHEZ
00 TRANSACTION APPROVED
AUTHORIZATION #: 019043
Reference: 0318010000195
TRANS TYPE: Credit Card SALE

CHECK :

72.91

TIP :

11.88

TOTAL :

84.79

X _____
Carla

Duplicate Copy

CARDHOLDER WILL PAY CARD ISSUER ABOVE
AMOUNT PURSUANT TO CARDHOLDER AGREEMENT
total and sign one copy, keep the other



CROWNE PLAZA®

NEW ORLEANS FRENCH QUARTER

180

03-18-19

Karla Fernandez Sanchez
SCT, Direccion General De
Transporte Ferroviario Y
Multimodal, SCT 051121MJ0.
Mexico City DF 03810

Folio No. :
 A/R Number :
 Group Code :
 Company :
 Membership No. :
 Invoice No. :

US Department of Transportation

Room No. : **0831**
 Arrival : **03-17-19**
 Departure : **03-19-19**
 Conf. No. :
 Rate Code :
 Page No. : **1 of 1**

Date	Description	Charges	Credits
03-17-19	Room Revenue	161.00	
03-17-19	Occupancy Tax (\$2.00)	2.00	
03-18-19	Room Revenue	161.00	
03-18-19	Occupancy Tax (\$2.00)	2.00	
03-18-19	Visa Card		326.00
		Total	326.00
		Balance	0.00

XXXXXXXXXXXX6548

61 2671 08319

*If applicable, by signing the line below, you agree to a \$200.00 cleaning fee for smoking in a Non-Smoking room.

Guest Signature:

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Dear Valued Guest: In the near future you may receive a **Heartbeat Email Survey** from Intercontinental Hotels Group (IHG). We ask that you please complete the survey and remember that a "10" rating means that your stay was enjoyable. If you enjoyed your stay, please give us a "10" rating. If your stay was less than enjoyable, please contact a member of our Management Team prior to completing the Heartbeat Survey.

IX ACP Hotel Owner LP, DBA Astor Crowne Plaza Hotel
 739 Canal Street
 New Orleans, LA 70130
 Phone: (504) 962-0500 Fax: (504) 962-0501



FACTURA:
FECHA DE EXPEDICION 2019-04-03T13:09:29
FECHA DE CERTIFICACION 2019-04-03T13:03:11,

EMISOR
YELLOW CAB DEL NUEVO AICM, AC
RFC STY090223LX3
REGIMÉN FISCAL 601
EXPEDIDO EN C.P. 15740
TIPO DE COMPROBANTE: I

RECEPTOR
SECRETARIA DE COMUNICACIONES Y
TRANSPORTES DIRECCIÓN GENERAL DE
DESARROLLO FERROVIARIO Y MULTIMODAL
RFC SCT051121MJ0
USOCFDI P01

CANTIDAD	UNIDAD	DESCRIPCION	PRECIO	IMPORTE
1		SERVICIO DE TRANSPORTACION TERRESTRE, BOLETO SERVICIO 185314190319805, FECHA: 2019-03-19 18:53:14 FORMA DE E48 PAGO: (TARJETA DE DÉBITO), TIPO DE VIAJE (LOCAL)	265.00	265.00
SUBTOTAL				265.00
IVA(EXENTO)				0.00
TOTAL				265.00

Este documento es una representación impresa de un CFDI
Forma de Pago 28
Método de Pago PUE
Número de serie del Certificado
Número de serie del Certificado SA*
UUII

Sello del SAT
Sello digital del
CFDI
Cadena original del
complemento de
certificación del
SAT

MAISON KAYSER®

EMISOR

FACTURA

Razón Social: ERIC KAYSER MÉXICO, S.A.P.I. DE C.V.
RFC: EKM1404018J1
Regímen Fiscal : 601 - General de Ley Personas Morales
Dirección: GIOTTO No. Ext.88 No. Int. Col.
ALFONSO XIII ALVARO OBREGON
CIUDAD DE MEXICO C.P 01460

Tipo de Comprobante: I - Ingreso
Certificado:
Fecha de Emisión: 2019-04-03 12:16:44
No. Certificado SAT:
Folio (UUID):

Fecha de Certificación: 2019-04-03 12:16:48

Sucursal

Nombre: MAISON KAYSER AICM T2 -
MAISON KAYSER AICM T2

Lugar de Expedición: 15620

Dirección:

Av. Capitán Carlos Leon Gonzalez
No. Ext.5/N No. Int.Sues s Is-20
Terminal 2 COL Zona Federal
Aeropuerto Internacional de la
Ciudad de México Venustiano

RECEPTOR

Nombre: SECRETARIA DE COMUNICACIONES Y TRANSPORTES
DIRECCION GENERAL DE DESARROLLO FERROVIARIO Y
MULTIMODAL

RFC: SCT051121MA0

Uso CFDI: P01 - Por definir

Dirección: NUEVA YORK No. Ext. 115 Col. NAPOLES C.P 03810 CIUDAD DE
MEXICO CIUDAD DE MEXICO

DATOS RESTAURANTE

Cheque: 57499 Fecha Cheque: 17-03-2019 Identificador Ticket: 19027499045639

PRODUCTOS Y SERVICIOS

Clave Producto	Número de Identificación	Cantidad	Clave	Unidad	Descripción	Precio Unitario	Descuento	Impuesto	Importe
90101501 - Restaurantes	2	E48		L.	ALMENDRA 210 ML	\$15.517241	0.00	002 - IVA Base: \$31,034482 Tasa: 0.160000 Importe: \$4,965517 Tipo Factor: Tasa	\$31,034482
90101501 - Restaurantes	2	E48			CAPUCHINO CHICO	\$59,482758	0.00	002 - IVA Base: \$118,965517 Tasa: 0.160000 Importe: \$19,034482 Tipo Factor: Tasa	\$118,965517

Importe con Letra: CIENTO NOVENTA Y UN PESOS 40/100 M.N.

Total Comprobante: \$174.00

Método de Pago: PUE - Pago en una sola exhibición Propina Tarjeta: \$17.4
Forma de Pago: 04 - Tarjeta de crédito Total a pagar: \$191.4
Moneda: MXN - Peso Mexicano
RFC Proveedor Certificado: SAD110722MCA

SELLO DIGITAL DEL CFDI

SELLO DIGITAL

CADENA ORIGINAL DEL COMPLEMENTO DE CERTIFICACIÓN DIGITAL DEL SAT