

**PURCHASE DIVISION**  
Advice for approval for credit to supplier

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Date: <u>6/4/22</u>		Prepared by: <u>Manoj</u>		Serial no. <u>2868</u>	
Supplier name: <u>Rebill zone</u>				HO inward no.	
Firm/Company: <u>MPPPL</u>		Project: <u>HO</u>		HO received date	
PO/WO date: <u>3/3/22</u>		PO/WO No.: <u>87075</u>		Scan ID.	
Sl no.	Bill no.	Bill date	Bill amount	Original attached	
1.	<u>3534</u>	<u>3/3/22</u>	<u>4721</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Amount A – Bills total (Excluding Transport & Hamali Charges):				<u>4721</u>	
Proof of delivery by way of: <input checked="" type="checkbox"/> DCs/bill <input type="checkbox"/> Steel report <input type="checkbox"/> RMC pour report <input type="checkbox"/> Solid block report <input type="checkbox"/> Installation report					
MRN nos.: <u>-</u>		Proof of delivery matches MRN		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Amount B – Other Credits : Transportation charges				<u>-</u>	
Amount C – Other Debits :				<u>-</u>	
Amount D (D=A+B-C) – Amount to be credited to the supplier:				<u>4721</u>	
Amount E – PO / WO value:				<u>4721</u>	
Amount F – Difference (A – E):				<u>-</u>	
Quantity received as per PO / WO		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Part received			
Close PO / WO		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> Other			
Payment – due date		<u>11/6/22</u>			
Remarks:					
Approved by	Purchase Officer	Purchase Manager	M D	Accountant	Accounts Manager
Name:	<u>Manoj</u>				
Sign:	<u>Manoj</u>				
Date	<u>6/4/22</u>				
Approval limit	Upto 20k	Above 20k	Above 100k	Upto 20k	Above 20k

Notes: 1. In case amount to be credited to supplier and the bills total does not match, accountants to prepare JV for debit or credit.  
2. This set should only have 5 documents i.e., advice to credit to supplier, original bill, proof of delivery, original purchase order with barcode, original requisition. 3. Do not attach additional documents like weighment slips, RMC batch reports, duplicate documents, Eway bills, test reports, etc. 4. In Amount A, exclude transport, Hamali charges, etc., and instead include in Amount B. 5. This report must reach HO within one working day of approval by purchase officer/purchase manager.

# Purchase Order

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06-04-2022 15:20:47



87075

04.04.22 1:33:42

dy

From Company : **Modi Properties Pvt.Ltd.**  
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003  
G S T No. : 36AABCM4761E1ZM

## Supplier Details

Refill Zone  
#223, 2nd floor, Kubera Towers, Naryanguda,Hyderbad-29.

Doc No	87075	183464
Doc Date	31-03-2022	
Quote No	Nil	
Quote Date	31-03-2022	
SupplyType	Supply	

**GSTIN** 36AMEPB3612K1ZD

65817414

9908271234

## Kind Attn : Mr.Venki

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 3523 - Computers and Peripherals - Toner refill - NA - nos HP 12A	2.00	200.00	0.00	18.00	472.00
<b>Total Order Value . . .</b>					<b>472.00</b>

Rupees : Four Hundred Seventy Two Only.

## Terms and Conditions :-

**Specification /** As per details given in the quotation.

**Payment Terms** After Delivery & Production of bill

**Tax** Inclusive of all taxes

**Delivery Date** Same Day

**Delivery Location** Head Office  
5-4-187/3 & 4, II nd Floor, M.G.Road, Secunderabad - 500003  
Phone. 040-66335551

**Penalty For Delay** Nil

**Transportation** Transport cost shall be borne by us.

**Warranty** Nil

**Advance Paid** Nil

**Other Terms** We reserve the right to reject items not conforming to quality and specifications. Above order for HO purpose

**Completion Date** Nil

**Measurment** Nil

**Security** Nil

**Remarks** Original invoice + copy of proof of delivery is required to process invoice for payment . Do not send original invoice to site. Original invoices must be sent to HO office or purchase site office. Proof of delivery /DC can be sent by email.

For **Modi Properties Pvt.Ltd.**

Authorised Signatory

  
Name : \_\_\_\_\_

Accepted the above Terms And Conditions

For **Refill Zone**

Name : \_\_\_\_\_

Date : \_\_\_/\_\_\_/\_\_\_

## Requisition Form

Company Name:		Modi Properties Pvt Ltd		Date:		31-03-2022	
Site & Phase :		Head office		Time:			
Supplier				Req. No.		183464	
Material required before date:					ID No.		75254
No	Description	Size	Quantity	Units	Inward No	Date	
1	12A toner refilling		2	Nos			
2							
3							
4							
5							
6							
7							
8							
9							
10							
Remarks: This is for HO							
Prepared By		Suneel		Approved by			
Sign. & Date		29-03-2022		Sign. & Date			

Note: On receipt of material at site write inward number and date in last 2 columns.



TAX INVOICE

- ◆ Laser Toners
- ◆ Ink Jets
- ◆ Ribbons
- ◆ Xerox Cartridges

# Refill Zone

Cell: 9908271234

The Complete Refilling & Printer Solutions...

# 223, 2nd Floor, Kubera Towers, Narayanguda, Hyderabad-500029.

E-mail: refillzone1234@gmail.com

**GSTIN No : 36AMEPB3612K1ZD**

Invoice No: <b>3534</b>	Invoice Date : 31/3/22	PO. No.	DC No.
State: TELANGANA	STATE CODE : 36		

Bill to M/s. <u>MODE PROPERTIES PVT LTD</u> Address : <u>Ranjivnagar</u> GSTIN : <u>36AABLM4761E1ZM</u> , STATE CODE : <u>36</u>	Shift to: <hr/> <hr/>
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Sl. No.	Name of Product / Service	HSN Code	QTY	RATE	AMOUNT	
					Rs.	Ps.
1.	Refilling B/T <u>HP-12A1R</u>	8443	2	200	400	00
2.	Refilling C/T					
3.	INKJET B/R					
4.	INKJET C/R					
5.	Toner Drum/C					
6.	Wiper Blade/c					
7.	Doctor Blade /C					
8.	Others					

**INWARD**

Inward No: <u>877</u>	Dt: <u>31/3/22</u>
MRN No:	Dt:
Received By: <u>Jarwar Sir</u>	Sign: <u>[Signature]</u>

**INWARD**

SUMMIT SALES PROPERTIES

No: 92945

Date: 31/3/22

Sign: [Signature]

P.R. DIST.

Total Invoice Amount in Words : <u>Four hundred and seventy two Rupees only.</u>	TOTAL AMOUNT BEFORE TAX : <u>400 00</u>
Bank Details : Bank Name : Andhra Bank (Srinivasapuram Br.) Bank Account Number : 111011100000964 Bank Branch IFSC Code : ANDB0001110	ADD : CGST : 9% <u>36 00</u>
	ADD : SGST : 9% <u>36 00</u>
	ADD IGST : 18%
	TOTAL AMOUNT AFTER TAX : <u>472 00</u>

<b>Terms and Conditions :</b> E & O E 1. Goods once sold will not be taken back. 2. Interest @ 24% p.a. be charged if the payment is not made with in the stipulated time. 3. Subject to "Telangana" Jurisdiction only.	Certified that the particulars given above are true and correct. <b>FOR Refill Zone</b> Authorised Signatory <u>[Signature]</u>
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**REFILL ZONE**

9908271234

HYD

(Common Seal)