

# PURCHASE DIVISION

## Advice for approval for credit to supplier

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|                                                                                                                                                                                                                                        |                  |                       |                                                                                                                                                                 |                               |                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------|
| Date: 14/4/22                                                                                                                                                                                                                          |                  | Prepared by: Kaviitha |                                                                                                                                                                 | Serial no.:                   | 3107                                                                |
| Supplier name: Summit Sales LLP                                                                                                                                                                                                        |                  | Project: GMR          |                                                                                                                                                                 | HO received date:             |                                                                     |
| Firm/Company: GMR                                                                                                                                                                                                                      |                  | PO/WO No.: 86729      |                                                                                                                                                                 | Scan ID:                      |                                                                     |
| PO/WO date: 24/3/22                                                                                                                                                                                                                    |                  | Bill date:            |                                                                                                                                                                 | Bill amount:                  | Original attached:                                                  |
| Sl no.                                                                                                                                                                                                                                 | Bill no.         |                       |                                                                                                                                                                 |                               | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 1.                                                                                                                                                                                                                                     | 22817            | 26/3/22               | 2520                                                                                                                                                            |                               | <input 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.                                                                                                                                                                                                                                     |                  |                       |                                                                                                                                                                 | 2520/-                        |                                                                     |
| Amount A - Bills total (Excluding Transport & Hamali Charges):                                                                                                                                                                         |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Proof of delivery by way of: <input 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.:                                                                                                                                                                                                                              | 105455           |                       |                                                                                                                                                                 | Proof of delivery matches MRN | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Amount B - Other Credits : Transportation charges                                                                                                                                                                                      |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Amount C - Other Debits :                                                                                                                                                                                                              |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Amount D (D=A+B-C) - Amount to be credited to the supplier:                                                                                                                                                                            |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Amount E - PO / WO value:                                                                                                                                                                                                              |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Amount F - Difference (A - E):                                                                                                                                                                                                         |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| 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                                                                                                                                                                                                                       |                  |                       | 18/04/22                                                                                                                                                        |                               |                                                                     |
| Remarks:                                                                                                                                                                                                                               |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Approved by                                                                                                                                                                                                                            | Purchase Officer | Purchase Manager      | MD                                                                                                                                                              | Accountant                    | Accounts Manager                                                    |
| Name:                                                                                                                                                                                                                                  |                  |                       |                                                                                                                                                                 |                               |                                                                     |
| Sign:                                                                                                                                                                                                                                  | Kaviitha         |                       |                                                                                                                                                                 |                               |                                                                     |
| Date                                                                                                                                                                                                                                   | 14/4/22          |                       |                                                                                                                                                                 |                               |                                                                     |
| 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 DIVISION**  
Advice for approval for credit to supplier

②

|                                |  |                      |  |                  |  |
|--------------------------------|--|----------------------|--|------------------|--|
| Date: 14/4/22                  |  | Prepared by: Kavitha |  | Serial no. 3107  |  |
| Supplier name: Summit Sales LP |  |                      |  | HO inward no.    |  |
| Firm/Company: GMR              |  | Project: GMR         |  | HO received date |  |
| PO/WO date: 24/3/22            |  | PO/WO No.: 86729     |  | Scan ID.         |  |

| Sl no. | Bill no. | Bill date | Bill amount | Original attached                                                   |
|--------|----------|-----------|-------------|---------------------------------------------------------------------|
| 1.     | 22817    | 26/3/22   | 2520        | <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):                                                                                                                                                                         |                               |                                                                                                                                                                 | 2520/-                                                              |
| Proof of delivery by way of: <input 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.: 105455                                                                                                                                                                                                                       | Proof of delivery matches MRN |                                                                                                                                                                 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Amount B – Other Credits : Transportation charges                                                                                                                                                                                      |                               |                                                                                                                                                                 | -                                                                   |
| Amount C – Other Debits :                                                                                                                                                                                                              |                               |                                                                                                                                                                 | -                                                                   |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:                                                                                                                                                                            |                               |                                                                                                                                                                 | 2520/-                                                              |
| Amount E – PO / WO value:                                                                                                                                                                                                              |                               |                                                                                                                                                                 | 2520/-                                                              |
| Amount F – Difference (A – E):                                                                                                                                                                                                         |                               |                                                                                                                                                                 | -                                                                   |
| 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                                                                                                                                                                                                                       |                               | 18/04/22                                                                                                                                                        |                                                                     |
| Remarks:                                                                                                                                                                                                                               |                               |                                                                                                                                                                 |                                                                     |

| Approved by    | Purchase Officer | Purchase Manager | MD         | Accountant | Accounts Manager |
|----------------|------------------|------------------|------------|------------|------------------|
| Name:          |                  |                  |            |            |                  |
| Sign:          | Kavitha          |                  |            |            |                  |
| Date           | 14/4/22          |                  |            |            |                  |
| 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.



## Summit Sales LLP

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G.Road, Secunderabad - 500003

Email: purchase@modiproperties.com

Supplier / Customer / Transporter - Copy

PAN: ACQFS2044C GSTIN/UNI: 36ACQFS2044C1Z7

1 of 1 :

## Customer Details

Modi Reality Mallapur LLP

Sy No, 19, Mallapur, Hyderabad, Next to NFC Railway Over Bridge, 500076

GSTIN : 36AAEFM1459R1ZP

PAN AAEFM1459R

|               |            |
|---------------|------------|
| Invoice No.   | 22817      |
| Invoice Date. | 26-03-2022 |
| PO No.        | 86729      |
| PO Date.      | 24-03-2022 |
| Req ID        | 74956      |
| Req Date      | 23-03-2022 |
| Loc Req No    | 192992     |

|    | Description of Goods                         | HSN/SAC | Qty | Rate   | Gross    | Tax% | Tax Amt |
|----|----------------------------------------------|---------|-----|--------|----------|------|---------|
| 1  | 4062 - Consumables - Torch light - Big - nos |         | 3   | 750.00 | 2,250.00 | 12   | 270.00  |
| 2  |                                              |         |     |        |          |      |         |
| 3  |                                              |         |     |        |          |      |         |
| 4  |                                              |         |     |        |          |      |         |
| 5  |                                              |         |     |        |          |      |         |
| 6  |                                              |         |     |        |          |      |         |
| 7  |                                              |         |     |        |          |      |         |
| 8  |                                              |         |     |        |          |      |         |
| 9  |                                              |         |     |        |          |      |         |
| 10 |                                              |         |     |        |          |      |         |
| 11 |                                              |         |     |        |          |      |         |
| 12 |                                              |         |     |        |          |      |         |
| 13 |                                              |         |     |        |          |      |         |
| 14 |                                              |         |     |        |          |      |         |
| 15 |                                              |         |     |        |          |      |         |

IGST

CGST

SGST

Total Taxable Amount

2,250.00

270.00

Total Invoice Amount

2,520.00

Rupees : Two Thousand Five Hundred Twenty Only.

Subject to Hyderabad Jurisdiction



for Summit Sales LLP

Authorised signatory

# Purchase Order

Page(s) 1 Of 1

24-03-2022 14:52:14



From Company : **Modi Reality Mallapur LLP**  
5-4-187/3&3, II nd floor, Soham Mansion, MG Road, Secunderabad.  
G S T No. : 36AAEFM1459R1ZP

## Supplier Details

Summit Sales LLP  
5-4-187/3&4,II nd floor,Soham Mansion,MG Road, Secunderabad

**GSTIN** 36ACQFS2044C1Z7

040-66335551

9618244433

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 86729      | 192992 |
| <b>Doc Date</b>   | 24-03-2022 |        |
| <b>Quote No</b>   | NIL        |        |
| <b>Quote Date</b> | 23-03-2022 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Hamendra,Prabhakar**

Purchase Order for the Supply of following Items.

| Item Name                                       | Qty  | Rate   | Dis% | GST   | Amount          |
|-------------------------------------------------|------|--------|------|-------|-----------------|
| 1 4062 - Consumables - Torch light - Big - nos  | 3.00 | 750.00 | 0.00 | 12.00 | 2,520.00        |
| <b>Total Order Value . . .</b>                  |      |        |      |       | <b>2,520.00</b> |
| Rupees : Two Thousand Five Hundred Twenty Only. |      |        |      |       |                 |

## Terms and Conditions :-

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

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

**Tax** Inclusive of all taxes

**Delivery Date** Next Day.

**Delivery Location** Gulmohar Residency  
Survey No 19, Mallapur, Hyderabad. NExt to NFC Railway Over Bridge  
Phone. Contact: Security \_\_\_\_\_, Admin 9502211011

**Penalty For Delay** Nil

**Transportation Cost** 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 night shift Security use 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 Reality Mallapur LLP**

Authorised Signatory

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

25/03/2022

Accepted the above Terms And Conditions

For **Summit Sales LLP**

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

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

| Company Name:                  |              | MODI REALTY MALLAPUR LLP |          | Requisition Form |           | Date:  |  | 23.03.22 |  |
|--------------------------------|--------------|--------------------------|----------|------------------|-----------|--------|--|----------|--|
| Site & Phase :                 |              | GULMOHAR RESIDENCY       |          | Time:            |           | 15:00  |  |          |  |
| Supplier                       |              |                          |          | Req. No.         |           | 192992 |  |          |  |
| Material required before date: |              | 25.03.22                 |          | ID No.           |           | 74956  |  |          |  |
| No                             | Description  | Size                     | Quantity | Units            | Inward No | Date   |  |          |  |
| 1.                             | Torch lights | Std                      | 3        | No's             |           |        |  |          |  |
| 2.                             |              |                          |          |                  |           |        |  |          |  |
| 3.                             |              |                          |          |                  |           |        |  |          |  |
| 4.                             |              |                          |          |                  |           |        |  |          |  |
| 5.                             |              |                          |          |                  |           |        |  |          |  |
| 6.                             |              |                          |          |                  |           |        |  |          |  |
| 7.                             |              |                          |          |                  |           |        |  |          |  |
| 8.                             |              |                          |          |                  |           |        |  |          |  |
| 9.                             |              |                          |          |                  |           |        |  |          |  |
| 10.                            |              |                          |          |                  |           |        |  |          |  |

Remarks: For night shift security purpose at GMR site

Prepared By A.Janaki

Sign. & Date 23.03.22

Note:

Approved by

Sign. & Date

APPROVED

25 MAR 2022

MINISH PARIKH  
MANAGER PROCUREMENT

APPROVED  
23 MAR 2022  
SAD  
PR



## DELIVERY CHALLAN

**Summit Sales LLP**

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G.Road, Secunderabad - 500003

Email: purchase@modiproperties.com

Supplier / Customer / Transporter - Copy

**GSTIN/UNI: 36ACQFS2044C1Z7**

1 of 1 : 26-03-2022

**Customer Details**

Modi Reality Mallapur LLP

Sy No, 19, Mallapur, Hyderabad, Next to NFC Railway Over Bridge, 500076

GSTIN : 36AAEFM1459R1ZP

|            |            |
|------------|------------|
| DC No.     | 19512      |
| DC Date.   | 26-03-2022 |
| PO No.     | 86729      |
| PO Date.   | 24-03-2022 |
| Req ID     | 74956      |
| Req Date   | 23-03-2022 |
| Loc Req No | 192992     |

## Description of Goods

HSN/SAC

Qty

1 4062 - Consumables - Torch light - Big - nos

3

2

3

4

5

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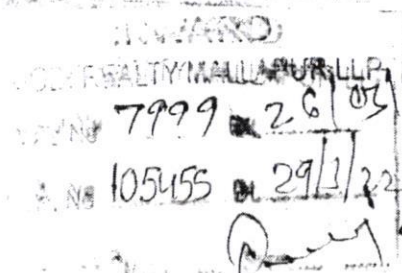
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for Summit Sales LLP

Subject to Hyderabad Jurisdiction



Authorised signatory