

PURCHASE DIVISION  
Advice for approval for credit to supplier

②

|                            |  |                                 |  |                  |  |
|----------------------------|--|---------------------------------|--|------------------|--|
| Date: 16/5/22              |  | Prepared by: <i>[Signature]</i> |  | Serial no. 4163  |  |
| Supplier name: Vivid world |  |                                 |  | HO inward no.    |  |
| Firm/Company: MRMLH        |  | Project: GMR                    |  | HO received date |  |
| PO/WO date: 10/5/22        |  | PO/WO No. 88303                 |  | Scan ID.         |  |

| Sl no. | Bill no. | Bill date | Bill amount | Original attached                                                   |
|--------|----------|-----------|-------------|---------------------------------------------------------------------|
| 1.     | 2340     | 10/5/22   | 271.40/-    | <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): 271.40/-

Proof of delivery by way of: ☒ DCs/bill ☐ Steel report ☐ RMC pour report ☐ Solid block report ☐ Installation report

|                  |                                                                                                   |
|------------------|---------------------------------------------------------------------------------------------------|
| MRN nos.: 107260 | 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: 271/-

Amount E – PO / WO value: 271/-

Amount F – Difference (A – E): —

Quantity received as per PO / WO ☒ Yes ☐ Excess received ☐ Short received ☐ Part received

Close PO / WO ☒ Yes ☐ No – wait for balance material ☐ Other

Payment – due date: 23/5/22

Remarks:

| Approved by    | Purchase Officer   | Purchase Manager | M D        | Accountant | Accounts Manager |
|----------------|--------------------|------------------|------------|------------|------------------|
| Name:          | <i>[Signature]</i> |                  |            |            |                  |
| Sign:          | <i>[Signature]</i> |                  |            |            |                  |
| Date           | 16/5/22            |                  |            |            |                  |
| 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.

**A Complete Solution for all your cartridge needs**

GSTIN : 36AVTPS1528D1ZB

|                          |      |    |                  |
|--------------------------|------|----|------------------|
| Invoice No. : 2340       |      |    | Transport Mode : |
| Invoice Date :10/05/2022 |      |    | Vehicle Number : |
| Reverse Charge (Y/N) :   |      |    | Date of Supply : |
| State : TELANGANA        | Code | 36 | Ship to Party    |

**GST:36ABCFM6774G2ZZ**

State : TELANGANA

GSTIN :

State :

Code

[illegible]

(RS.271.40)

|              |  |
|--------------|--|
| ADD :CGST 9% |  |
|--------------|--|

ADD: SGST 9%

|                        |  |
|------------------------|--|
| Total Amount After Tax |  |
|------------------------|--|

271.40

230.00

20.70

20.70

271.40

### Bank Details

Bank Name : INDIAN BANK

Branch : Narayanguda Branch

Bank A/C : 406746378

Bank IFSC : IDIB000N015

Common Seal

Certified that the particulars given above are true and correct

For **VIVID WORLD**

Authorized Signatory

## Purchase Order

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16-05-2022 12:56:21

Ori:

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



88303

27.04.22 12:24:13

**Supplier Details**

Vivid World  
204, Kubera Towers, Narayanaguda, Hyderabad.

**GSTIN** 36AVTPS1528D1ZB

6682-3161/ 6682-3171

92462-15868

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 88303      | 203019 |
| <b>Doc Date</b>   | 10-05-2022 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 10-05-2022 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Mr. Vishal**

Purchase Order for the Supply of following Items.

| Item Name                                                             | Qty  | Rate   | Dis% | GST   | Amount        |
|-----------------------------------------------------------------------|------|--------|------|-------|---------------|
| 1 3523 - Computers and Peripherals - Toner refill - NA - nos<br>HP12A | 1.00 | 230.00 | 0.00 | 18.00 | 271.40        |
| <b>Total Order Value . . .</b>                                        |      |        |      |       | <b>271.40</b> |

Rupees : Two Hundred Seventy One and Paise Fourty Only.

**Terms and Conditions :-**

|                          |                                                                                                                                                                                                                                                  |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Specification /</b>   | As per details given in the quotation                                                                                                                                                                                                            |
| <b>Payment Terms</b>     | After Delivery & Production of bill                                                                                                                                                                                                              |
| <b>Tax</b>               | All taxes included in above price.                                                                                                                                                                                                               |
| <b>Delivery Date</b>     | Same Day                                                                                                                                                                                                                                         |
| <b>Delivery Location</b> | Head Office<br>5-4-187/3 & 4, II nd Floor, M.G.Road, Secunderabad - 500003<br>Phone. 040-66335551                                                                                                                                                |
| <b>Penalty For Delay</b> | Nil                                                                                                                                                                                                                                              |
| <b>Transportation</b>    | Included in the above price.                                                                                                                                                                                                                     |
| <b>Warranty</b>          | Nil                                                                                                                                                                                                                                              |
| <b>Advance Paid</b>      | Nil                                                                                                                                                                                                                                              |
| <b>Other Terms</b>       | We reserve the right items not conforming to quality and specifications. Above order for Head Office Purpose.                                                                                                                                    |
| <b>Completion Date</b>   | Nil                                                                                                                                                                                                                                              |
| <b>Measurment</b>        | Nil                                                                                                                                                                                                                                              |
| <b>Security</b>          | Nil                                                                                                                                                                                                                                              |
| <b>Remarks</b>           | 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

Accepted the above Terms And Conditions

For **Vivid World**

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

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

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

# Requisition Form

|                                |                     |                      |          |              |           |            |       |
|--------------------------------|---------------------|----------------------|----------|--------------|-----------|------------|-------|
| Company Name:                  |                     | Modi Realty Mallapur |          | Date:        |           | 10-05-2022 |       |
| Site & Phase :                 |                     | Head Office          |          | Time:        |           |            |       |
| Supplier                       |                     |                      |          | Req. No.     |           | 203019     |       |
| Material required before date: |                     |                      |          |              | ID No.    |            | 76415 |
| No                             | Description         | Size                 | Quantity | Units        | Inward No | Date       |       |
| 1                              | 12A toner refilling |                      | 1        | No           |           |            |       |
| 2                              |                     |                      |          |              |           |            |       |
| 3                              |                     |                      |          |              |           |            |       |
| 4                              |                     |                      |          |              |           |            |       |
| 5                              | 88303               |                      |          |              |           |            |       |
| 6                              |                     |                      |          |              |           |            |       |
| 7                              |                     |                      |          |              |           |            |       |
| 8                              |                     |                      |          |              |           |            |       |
| 9                              |                     |                      |          |              |           |            |       |
| 10                             |                     |                      |          |              |           |            |       |
| Remarks: This is for HO        |                     |                      |          |              |           |            |       |
| Prepared By                    |                     | Suncel               |          | Approved by  |           |            |       |
| Sign.& Date                    |                     | 10-05-2022           |          | Sign. & Date |           |            |       |

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