

PURCHASE DIVISION
Advice for approval for credit to supplier

Date: 7/6/22		Prepared by: [Signature]		Serial no. 4999	
Supplier name: Virid world				HO inward no.	
Firm/Company: SSKWP		Project: HO		HO received date	
PO/WO date: 30/5/22		PO/WO No. 88990		Scan ID.	

Sl no.	Bill no.	Bill date	Bill amount	Original attached
1.	2356	30/5/22	1050.20	☒ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No
4.				☐ Yes ☐ No

Amount A – Bills total (Excluding Transport & Hamali Charges): 1050.20

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

MRN nos.:	Proof of delivery matches MRN ☒ Yes ☐ No
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Amount B – Other Credits : Transportation charges

Amount C – Other Debits :

Amount D (D=A+B-C) – Amount to be credited to the supplier: 1050

Amount E – PO / WO value: 1050

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: 12/6/22

Remarks:

Approved by	Purchase Officer	Purchase Manager	M D	Accountant	Accounts Manager
Name:	[Signature]				
Sign:	[Signature]				
Date	7/6/22				
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. : 2356			Transport Mode :
Invoice Date :30/05/2022			Vehicle Number :
Reverse Charge (Y/N) :			Date of Supply :
State : TELANGANA	Code	36	

Ship to Party

GSTIN :

Co
de

State :

Code

INWARD	
Inward No: 161	Di: 8-10/11
MRN No:	Di:
Received By: Jamarin	Sign: 
MODI PROPERTIES	

890.00

SUMMIT SALES LTD.
IN WARD
No. 95355
Date: 8/4/22
Sign: L.
P.R. DIST.

160.20		1050.20
		890.00
70.65		80.10
ADD: SGST 9%		80.10
Total Amount After Tax		1050.20

Certified that the particulars given above are true and correct

For **VIVID WORLD**

Authorized Signatory

Purchase Order

Page(s) 1 Of 1

07-06-2022 14:19:42



88990

20.05.22 3:37:24

From Company : **Summit Sales LLP**
5-4-187/3&4, II nd floor, MG Road, Secunderabad-500003.
G S T No. : 36ACQFS2044C1Z7

Supplier Details

Vivid World
204, Kubera Towers, Narayanaguda, Hyderabad.

GSTIN 36AVTPS1528D1ZB

6682-3161/ 6682-3171

92462-15868

Doc No	88990	203032
Doc Date	30-05-2022	
Quote No	Nil	
Quote Date	30-05-2022	
SupplyType	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	3.00	230.00	0.00	18.00	814.20
2 3530 - Computers and Peripherals - Toner Magnet - Other - nos	2.00	100.00	0.00	18.00	236.00
Total Order Value . . .					1,050.20

Rupees : One Thousand Fifty and Paise Twenty Only.

Terms and Conditions :-

Specification /	As per details given in the quotation
Payment Terms	After Delivery & Production of bill
Tax	All taxes included in above price.
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	Included in the above price.
Warranty	Nil
Advance Paid	Nil
Other Terms	We reserve the right 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 **Summit Sales LLP**

Authorised Signatory

Name : _____

Accepted the above Terms And Conditions

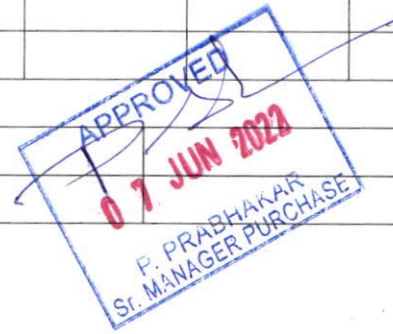
For **Vivid World**

Name : _____

Date : __/__/__

Requisition Form

Company Name:		Summit Sales LLP		Date:		30-05-2022	
Site & Phase :		Head Office		Time:			
Supplier				Req. No.		203032	
Material required before date:			ID No.			76945	
No	Description	Size	Quantity	Units	Inward No	Date	
1	12A toner refilling		3	Nos			
2	Toner blade		2	Nos			
3							
4							
5							
6	88990						
7							
8							
9							
10							
Remarks: This is for HO.							
Prepared By		K.Suneel		Approved by			
Sign.& Date		30-05-2022		Sign. & Date			



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

Requisition Form

Company Name:				Date:			
Site & Phase :				Time:			
Supplier				Req. No.			
Material required before date:			ID No.				
No	Description	Size	Quantity	Units	Inward No	Date	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Remarks:							
Prepared By				Approved by			
Sign.& Date				Sign. & Date			

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