

PURCHASE DIVISION  
Advice for approval for credit to supplier

|                                                                                                                                                                                                                                        |                  |                                                                                                                                                                 |             |                                                                     |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------|------------------|
| Date: 01/07/22                                                                                                                                                                                                                         |                  | Prepared by: MINISH.                                                                                                                                            |             | Serial no. 5725                                                     |                  |
| Supplier name: Global Safety Solutions                                                                                                                                                                                                 |                  |                                                                                                                                                                 |             | HO inward no.                                                       |                  |
| Firm/Company: GSCLP.                                                                                                                                                                                                                   |                  | Project: SHLLP.                                                                                                                                                 |             | HO received date                                                    |                  |
| PO/WO date: 09/05/22                                                                                                                                                                                                                   |                  | PO/WO No. 88109.                                                                                                                                                |             | Scan ID.                                                            |                  |
| Sl no.                                                                                                                                                                                                                                 | Bill no.         | Bill date                                                                                                                                                       | Bill amount | Original attached                                                   |                  |
| 1.                                                                                                                                                                                                                                     | 2017.            | 27/06/22                                                                                                                                                        | 15,680/-    | <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):                                                                                                                                                                         |                  |                                                                                                                                                                 |             | 15,680/-                                                            |                  |
| 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.: 109002.                                                                                                                                                                                                                      |                  | 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:                                                                                                                                                                            |                  |                                                                                                                                                                 |             | 15,680/-                                                            |                  |
| Amount E – PO / WO value:                                                                                                                                                                                                              |                  |                                                                                                                                                                 |             | 1,00,240/-                                                          |                  |
| Amount F – Difference (A – E):                                                                                                                                                                                                         |                  |                                                                                                                                                                 |             | 84,560/-                                                            |                  |
| 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                                                                                                                                                                                                                     |                  | 11/07/22                                                                                                                                                        |             |                                                                     |                  |
| Remarks: Final Bill                                                                                                                                                                                                                    |                  |                                                                                                                                                                 |             |                                                                     |                  |
|                                                                                                                                                                                                                                        |                  |                                                                                                                                                                 |             |                                                                     |                  |
| Approved by                                                                                                                                                                                                                            | Purchase Officer | Purchase Manager                                                                                                                                                | M D         | Accountant                                                          | Accounts Manager |
| Name:                                                                                                                                                                                                                                  |                  |                                                                                                                                                                 |             |                                                                     |                  |
| Sign:                                                                                                                                                                                                                                  |                  |                                                                                                                                                                 |             |                                                                     |                  |
| Date                                                                                                                                                                                                                                   |                  |                                                                                                                                                                 |             |                                                                     |                  |
| 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.

2372 44

(ORIGINAL FOR RECIPIENT)

State Name : Telangana, Code : 36

Terms of Delivery

Destination

|                         |                                                                                           |
|-------------------------|-------------------------------------------------------------------------------------------|
| <b>INWARD</b>           |                                                                                           |
| Inward No: 18347        | Dr: 27/6/22                                                                               |
| MRN No: 109002          | Dr: 28/6/22                                                                               |
| Received By:            | Sign:  |
| <b>SUMMIT SALES LLP</b> |                                                                                           |

E &amp; O E

Tax Amount (in words) : **INR One Thousand Six Hundred Eighty Only**

for GLOBAL SAFETY SOLUTIONS

This is a Computer Generated Invoice

Authorized Signatory

|                  |              |
|------------------|--------------|
| INWARD           |              |
| Legend No: 200   | Dr. 200/10   |
| MRM No: 10000    | Dr. 10000/10 |
| Received By:     | Sign:        |
| SUMMIT SALES LLP |              |



# Purchase Order

Page 1 Of 1

09-05-2022 17:04:39



88109

27.04.22 12:24:12

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

| Supplier Details                                                                                               |            |            |        |
|----------------------------------------------------------------------------------------------------------------|------------|------------|--------|
| Global Safety Solutions<br>5-5-48, Ranigunj, secunderbad<br><br>GSTIN 36AAOFG9573A1Z5<br>9502555088/9581228898 | Doc No     | 88109      | 169772 |
|                                                                                                                | Doc Date   | 09-05-2022 |        |
|                                                                                                                | Quote No   | Nil        |        |
|                                                                                                                | Quote Date | 09-05-2022 |        |
|                                                                                                                | SupplyType | Supply     |        |

Kind Attn : Mr.Qasim Hussain/AQ Shakir

Purchase Order for the Supply of following Items.

| Item Name                                                      | Qty   | Rate   | Dis% | GST   | Amount     |
|----------------------------------------------------------------|-------|--------|------|-------|------------|
| 1 6155 - Miscellaneous - Safety Shoe - NA - pair<br>Male-6 ✓   | 40.00 | 475.00 | 0.00 | 12.00 | 21,280.00  |
| 2 6155 - Miscellaneous - Safety Shoe - NA - pair<br>Male-9 ✓   | 40.00 | 475.00 | 0.00 | 12.00 | 21,280.00  |
| 3 6155 - Miscellaneous - Safety Shoe - NA - pair<br>Male-10 ✓  | 20.00 | 475.00 | 0.00 | 12.00 | 10,640.00  |
| 4 6155 - Miscellaneous - Safety Shoe - NA - pair<br>Female-6 ✓ | 20.00 | 700.00 | 0.00 | 12.00 | 15,680.00  |
| 5 6155 - Miscellaneous - Safety Shoe - NA - pair<br>Female-7 ✓ | 20.00 | 700.00 | 0.00 | 12.00 | 15,680.00  |
| 6 6155 - Miscellaneous - Safety Shoe - NA - pair<br>Female-8 ✓ | 20.00 | 700.00 | 0.00 | 12.00 | 15,680.00  |
| Total Order Value . . .                                        |       |        |      |       | 100,240.00 |
| Rupees : One Lakh(s) Two Hundred Fourty 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 Next Day.

Delivery Location Summit Housing LLP  
Cherlapally, Behind Kingston PG college, Hyderabad  
Phone. 9618244433, Hamendra

Penalty For Delay Nil

Transportation Transportation Extra.

Warranty Nil

Advance Paid Nil

Other Terms We reserve the right to reject items not conforming to quality and specifications. Above order for Stock replenishing 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 :

Contact :-

For MDs APPROVAL

- ☒ High Value/quantity beyond limits.
- ☒ Po/Revised order post approval.
- ☐ Approval for technical details/clarification.
- ☐ Replenishing GOLLP stock
- ☐ Other



| Sl.No. | Bill Dt.                                | Amount          |
|--------|-----------------------------------------|-----------------|
| 1956   | 11/05/22                                | 84,560/-        |
| 3.     | Accepted the above Terms And Conditions |                 |
| 4.     | For <b>Global Safety Solutions</b>      |                 |
| 5.     |                                         |                 |
| Name : |                                         | Date : _/_/2022 |

1541 - 15,680/-



# Requisition Form

|                                         |               |                  |          |              |              |                                                                                                                                                                                |  |
|-----------------------------------------|---------------|------------------|----------|--------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Company Name:                           |               | SUMMIT SALES LLP |          | Date:        |              | 06.05.2022                                                                                                                                                                     |  |
| Site & Phase :                          |               | SHLLP            |          | Time:        |              | 10:57                                                                                                                                                                          |  |
| Supplier                                |               |                  |          | Req.No.      |              | 169772                                                                                                                                                                         |  |
| Material required before date:          |               |                  |          | ID No.       |              | 76296                                                                                                                                                                          |  |
| N<br>o                                  | Description   | Size             | Quantity | Units        | Inward<br>No | Date                                                                                                                                                                           |  |
| 1.                                      | Shoe (male)   | 6                | 40       | Nos          |              |                                                                                                                                                                                |  |
| 2.                                      | Shoe (male)   | 9                | 40       | Nos          |              |                                                                                                                                                                                |  |
| 3.                                      | Shoe (male)   | 10               | 20       | Nos          |              |                                                                                                                                                                                |  |
| 4.                                      | Shoe (female) | 6                | 20       | Nos          |              |                                                                                                                                                                                |  |
| 5.                                      | Shoe (female) | 7                | 20       | Nos          |              |                                                                                                                                                                                |  |
| 6.                                      | Shoe (female) | 8                | 20       | Nos          |              |                                                                                                                                                                                |  |
| Remarks: For stock replenishig purpose. |               |                  |          |              |              |                                                                                                                                                                                |  |
| Prepared By                             |               | Vanajakshi       |          | Approved by  |              | <div style="border: 1px solid blue; padding: 5px; text-align: center;"> <b>APPROVED BY</b><br/> <b>07 MAY 2022</b><br/> <b>SOHAM MODI</b><br/> <b>MANAGING DIRECTOR</b> </div> |  |
| Sign.& Date                             |               | 06.05.2022       |          | Sign. & Date |              |                                                                                                                                                                                |  |

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

✓

0175 x.5d/