

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

|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  |                                                          |            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------|------------|
| Date: 8/3/23                                                                                                                                                                                                                           |  | Prepared by: [Signature]                                                                                                                             |                  | Serial no.                                               |            |
| Supplier name: Menta Prop Borey on the RACD                                                                                                                                                                                            |  | Project: AIRPORT ROAD                                                                                                                                |                  | HO inward no.                                            |            |
| PO/WO date:                                                                                                                                                                                                                            |  | PO/WO No.:                                                                                                                                           |                  | HO received date:                                        |            |
| Si no.                                                                                                                                                                                                                                 |  | Bill no.                                                                                                                                             |                  | Scan ID.                                                 |            |
|                                                                                                                                                                                                                                        |  | Bill date                                                                                                                                            |                  | Bill amount                                              |            |
| 1.                                                                                                                                                                                                                                     |  | 135                                                                                                                                                  |                  | 14/2/23                                                  |            |
| 2.                                                                                                                                                                                                                                     |  |                                                                                                                                                      |                  | 12,460                                                   |            |
| 3.                                                                                                                                                                                                                                     |  |                                                                                                                                                      |                  |                                                          |            |
| 4.                                                                                                                                                                                                                                     |  |                                                                                                                                                      |                  |                                                          |            |
|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  | Original attached                                        |            |
|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |            |
| 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.:                                                                                                                                                                                                                              |  | Proof of delivery matches MRN                                                                                                                        |                  | <input 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.                                                                                                                                                                                                              |  |                                                                                                                                                      |                  | 12,460                                                   |            |
| Amount F - Difference (A - E):                                                                                                                                                                                                         |  |                                                                                                                                                      |                  | 12,460                                                   |            |
| Quantity received as per PO / WO                                                                                                                                                                                                       |  | <input type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Part received |                  |                                                          |            |
| Close PO / WO                                                                                                                                                                                                                          |  | <input type="checkbox"/> Yes <input type="checkbox"/> No - wait for balance material <input type="checkbox"/> Other                                  |                  |                                                          |            |
| Payment - due date                                                                                                                                                                                                                     |  |                                                                                                                                                      |                  |                                                          |            |
| Remarks:                                                                                                                                                                                                                               |  |                                                                                                                                                      |                  |                                                          |            |
|                                                                                                                                                                                                                                        |  |                                                                                                                                                      |                  |                                                          |            |
| Approved by                                                                                                                                                                                                                            |  | Purchase Officer                                                                                                                                     | Purchase Manager | M D                                                      | Accountant |
| Name:                                                                                                                                                                                                                                  |  | [Signature]                                                                                                                                          |                  |                                                          |            |
| Sign:                                                                                                                                                                                                                                  |  | [Signature]                                                                                                                                          |                  |                                                          |            |
| Date:                                                                                                                                                                                                                                  |  | 3/3/23                                                                                                                                               |                  |                                                          |            |
| 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.

