# PURCHASE DIVISION Advice for approval for credit to supplier

| Date:   | 12/05/23                       |                          | Prepared by |                  | V. RAV)      |           | Serial no.    |         | 17544               |  |
|---|--------------------------------|--------------------------|-------------|------------------|--------------|-----------|---------------|---------|---------------------|--|
| Supplier na   | me                             | Cemex r                  | fotra.      | 2                |              |           | HO inward no. |         | 2                   |  |
| Firm/Comp   | any                            | 176)                     |             | Green M          |              | lowed     | HO receive    | ed date |                     |  |
| PO/WO dat   | e 05/04/22 PO/WON              |                          |             | No. 87077.       |              | Scan ID.  |               |         |                     |  |
| Sl no.  |                                | Bill no.                 |             | Bill             | Bill date B  |           | Bill amount   |         | Original attached   |  |
| 1.  |                                | 0                        |             | 03/5/23 19       |              |           | 1,200/-       |         | Yes 🗆 No            |  |
| 2.  |                                |                          |             |                  |              |           |               |         | □ Yes □ No          |  |
| 3.  |                                |                          |             |                  |              |           |               |         | □ Yes □ No          |  |
| 4.  |                                |                          |             |                  |              |           |               |         | □ Yes □ No          |  |
| Amount A – Bills total (Excluding Transport & Hamali Charges):  |                                |                          |             |                  |              |           |               |         |                     |  |
| Proof of delivery by way of: □ DCs/bill □ Steel report □ RMC pour report □ Solid block report □ Installation report |                                |                          |             |                  |              |           |               |         |                     |  |
| MRN   |                                | 8                        |             | Proof of matches |              |           |               |         | □ Yes □ No          |  |
| nos.:   | Othor C                        | Credits : Transportation | an aharaa   |                  | i e          | matche    | S IVIKIN      |         |                     |  |
|   |                                |                          | on charge   | 5                |              |           |               |         | _                   |  |
|   | Amount C –Other Debits :       |                          |             |                  |              |           |               |         |                     |  |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:   |                                |                          |             |                  |              |           |               |         |                     |  |
| Amount E – PO / WO value: 38,4 to -to   |                                |                          |             |                  |              |           |               |         |                     |  |
| Amount F -  | Amount F – Difference (A – E): |                          |             |                  |              |           |               |         |                     |  |
| Quantity received as per PO /WO   □ Yes □ Excess received □ Short received ☑ Part received                          |                                |                          |             |                  |              |           |               |         |                     |  |
| Close PO /  | WO                             |                          |             | Yes 🗆            | No – wait fo | r balance | e material    | Other   |                     |  |
| Payment - c   | due date                       |                          |             |                  | 5/21         |           |               |         |                     |  |
| Remarks:  |                                | Supplier 2               | शह          | elt P            | الله الم     |           | a. r          |         | her paid            |  |
|   | 2:11                           | to be                    | Proc        | cessed           | do           | 6         | of com        | 5.      | 8                   |  |
| Approve   | d by                           | Purchase Officer         |             | rchase<br>mager  | MD           |           | Accoun        | itant   | Accounts<br>Manager |  |
| Name:   |                                |                          | V- 1        | LAVI             |              |           |               |         |                     |  |
| Sign:   |                                |                          | 1           | 20               | W            | UED P     | Y             |         |                     |  |
| Date  |                                |                          | 121         | 5/23.            | APPR         | 245       | 13            |         |                     |  |
| Approval li   | mit                            | Upto 20k                 | Above 2     | 20k              | Above 100    | KIAI W    | Upto 20k      | 4- 4-   | 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.



### Form for closure of purchase order

| PO no.: 87                             | 077           | PO date:        | DK/      | 041   | 2022        | Req       | . no.:      | 183                                   | 471              | Advic   | e Scan ID              |                |
|--|---------------|-----------------|----------|---|-------------|-----------|-------------|---------------------------------------|------------------|---------|------------------------|----------------|
| Barcoded PO a                          |               | ✓ Y/□ N         |          |   | inal avail  | able      | □Y/MN       | /□Copy                                | available        | PC      | DD available           | DY/M           |
| Data required f                        | from site/e   | ngineers:       |          |   |             |           |             |                                       |                  |         |                        |                |
| MRN nos. re                            | elated to     |                 |          | ,   |             |           |             |                                       |                  |         | 8                      |                |
| □ Part material received.              |               |                 |          |   |             |           |             |                                       | □ Mate           | erial n | ot received.           |                |
| □ Close PO – I                         | Balance ma    | aterial will b  |          |   |             |           |             |                                       |                  |         |                        |                |
| □ Cancel PO. N                         | Material no   | ot required.    |          | ☐ Cancel PO. Material will be re-ordered by new requisition |             |           |             |                                       |                  |         |                        |                |
| □ Keep PO ope                          | en. Materia   | al required.    |          | Keep  | PO open.    | Work      | under p     | rogress                               |                  |         |                        |                |
| Remarks by en                          | igineer: N    | laterial        | Se       | our   | t. at       | 814       | te &        | Llon                                  | 60               | nel     |                        |                |
| Notes: 1. Provide of invoices if avail | details of ma | terial received | by way o | f separa  | te attachme | nt. 2. Pr | rovide scar | ned copy                              | of DCs/pro       | of of d | elivery + PO. 3.       | Provide copies |
| Prepared by:                           |               | lihi .nl        |          | Sign: WA and  |             |           |             | Date: (                               | 3/00             | 1/2023  |                        |                |
| Data required                          |               |                 |          |   | 1           |           | 7.4         |                                       |                  |         |                        |                |
|  | Checked       | with E&D f      | or rece  | ipt of b  | oills.      |           |             |                                       |                  |         |                        |                |
| Bills not rec                          | eived again   | nst this PO.    |          | ☐ Part bill received against this PO.                       |             |           |             | □ All bills received against this PO. |                  |         |                        |                |
| □ Advance paid against this PO         |               |                 |          | Amount paid:  |             |           |             | Date of                               | Date of payment: |         |                        |                |
| Details of part                        | bill receiv   | ed:             |          |   |             |           |             |                                       |                  |         |                        |                |
| Sl. No.                                | Bill no.      |                 | ]        | Bill da   | te          |           | Bill        | amoun                                 | t                |         | Cr. given to           | supplier       |
| 1.                                     |               |                 |          |   |             |           |             |                                       |                  |         |                        |                |
| 2.                                     |               |                 |          |   |             |           |             |                                       |                  |         |                        |                |
| 3.                                     |               |                 |          |   |             |           |             |                                       |                  |         |                        |                |
| 4                                      |               |                 |          |   |             |           |             |                                       |                  |         |                        |                |
| Remarks by A                           | ccountants    | s:              |          |   |             |           |             |                                       |                  |         |                        |                |
| Prepared by:                           | Shaik         | Hisida          |          | ign:  | Silas       | W         |             |                                       | Date:            | 17      | loul23                 |                |
| Notes: 1. POs/WO                       | Os issued for | turnkey works   | - may ha | ve been   | processed b | y E&D     | . Check be  | fore filling                          | g the above.     | )       |                        |                |
| Prepared by:                           |               |                 | S        | ign:  |             |           |             |                                       | Date:            |         |                        |                |
| Remarks by R                           | tavi + deta   | ils of bills to | be app   | proved  |             |           |             |                                       |                  |         |                        |                |
| Sl. No.                                | Bill no.      |                 |          | Bill da   |             |           | Bil         | l amour                               | nt               |         | MRN no.                |                |
| 1.                                     |               |                 |          |   |             |           |             |                                       |                  |         |                        |                |
| 2.                                     |               |                 |          |   |             |           |             |                                       |                  |         |                        |                |
| 3.                                     |               | 1               | -1111    |   | True        |           | COPY        | for                                   | Veu              | dor.    |                        |                |
| Remarks:                               | Niee          | 2 (6            | श्रीक    |   | ·   yue     | 1         | 1           | 7.                                    |                  | 1al     | 129.                   |                |
| Prepared by:                           |               |                 |          | sign:   | -           | AU        |             |                                       |                  | 10/     | 117.                   |                |
| Advice by M                            |               |                 |          | - 10  |             | To        | Drenare     | bill in S                             | SLLP for         | mate    | rial supplied.         |                |
| Get certifie                           | ed bill from  | supplier (n     | ot origi | nal).   |             |           | -           |                                       |                  |         |                        |                |
|  |               | prepare adv     | rice for | credit  | to supplie  |           | Sella to r  | Keen                                  | PO open.         | Mate    | rial awaited           |                |
|  | Close PO      |                 |          |   |             | unnlie    | r's ladge   |                                       |                  |         |                        |                |
|  | Accounts to   | o be reconci    | led with | h supp  | lier. Get s | uppne     | a s leage   | vi.                                   |                  | A       | PPROVED                | BA             |
| Remarks:                               |               |                 |          |   |             |           |             | D                                     | ate: W           | -       | 17 APR 7               | UZ3            |
| Approved by                            | : Soham       |                 |          | Sign:   |             |           |             |                                       |                  | -       | SOHAM M                | ODI            |
|  |               |                 |          |   |             |           |             |                                       |                  | NA !    | SOHAM M<br>ANAGING DIF | RECTOR         |

#### Purchase Order

05-04-2022 3:10:55 PM

From Company : Mody Consultancy Services

5-4-187/3&4, II Floor, M.G.Road, Secunderabad-500003.

GSTNo.:



183471

#### Supplier Details

8367099999

9848210686

CEMEX INFRA Doc No Sy. no. 312, Rampally (V111), Kesara (Mandal) Medchal Dist. - 501301

Doc Date

87077

05-04-2022

**Ouote No** 

NIL

**Quote Date** 

05-04-2022

SupplyType

Orig

Supply

#### Kind Attn: G.Surendar Reddy

Purchase Order for the Supply of following Items.

|  | Item Name                             | Qty | Rate     | Dis%     | GST% | Amount    |
|--|---------------------------------------|-----|----------|----------|------|-----------|
| 1 1013 - Building ma<br>mtrs.<br>DLC-M10 | aterial - Ready Mix Concrete - NA - c |     | 3,200.00 | 0.00     | 0.00 | 38,400.00 |
|  |                                       |     |          | der Valu | e    | 38,400.00 |

Rupees: Thirty Eight Thousand Four Hundred Only.

Terms and Conditions :-

Specification / Brand Concrete mix shall be of 'Cemex' Ready Mix Concrete.

Payment Terms

Within 30 days of delivery of all materials & production of bill.

Tax

All taxes included in above price.

Delivery Date

As per request of Project Manager

Delivery Location

Greens Towers Contact Person Mr Rajshekhar Reddy-9618953550.

Begumpet Main Road, Hyd. Opp. Hyderabad Public School.

Phone. 66335551

Penality For Delay

Bills must be submitted to H.O. within 30days of suppy of material.10% plty on value of order will be deducted in delay submission of bills.

Transportation Cost

Included in the above price

Warranty

Advance Paid

Other Terms

Payment will be made only after inspection of material. Above order for Towards front side road&ramp towards varun towers levelling purpose.

Completion Date

Measurment

Security 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 Mody Consultancy Services

Authorised Sign

Accepted the above Terms And Conditions

For CEMEX INFRA

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

## Requisition Form

| Com                          | pany Name:                                    | MCS                 |       |       | Date                  |          |                        | 01-04-2022         |      |
|------------------------------|---|---------------------|-------|-------|-----------------------|----------|------------------------|--------------------|------|
| Site & Phase : GREENS TOWERS |   |                     | OWERS | Time: |                       |          | NAME OF TAXABLE PARTY. |                    |      |
|                              | Supplier  Material required before date:  Urg |                     |       |       | Req. No.              |          |                        | 183471             |      |
| No                           | Description                                   |                     |       | Size  |                       | Quantity | Units                  | 75282<br>Inward No | Date |
| 1                            | DLC   |                     |       | STD   |                       | 400      | CFI                    |                    |      |
|                              |   | 80/6                | 17    |       |                       |          | 12/4                   | r culity           |      |
| Prep                         | arks: Towards from                            | NIKIL<br>01- 04-202 | 2     |       | Approved<br>Sign. & I | Jate     | APPRO<br>01 A          | PR 2022            |      |

|                       |   |      | TAX INVOICE          |            |                  |             |
|-----------------------|---|------|----------------------|------------|------------------|-------------|
| CEMEX INFI            | RA  | В    | ILL NO-1             | Dated 03-M | ay-2023          |             |
| Řampally Vi           | II  |      | -                    |            |                  |             |
| Keesara Mdl           | , Medchal Dist-501 30   | )1 F | PO NO - 87077-183471 |            |                  |             |
|                       |   |      |                      |            |                  |             |
| Buyer                 |   |      |                      |            |                  |             |
| Modi Consu            | ultancy Services  |      |                      |            |                  |             |
| 5-4-182/3&4           | ,II Floor, M.G. Road,   |      |                      |            |                  |             |
| Secunderab            | ad-5000003  |      |                      |            |                  |             |
|                       |   |      |                      |            |                  |             |
| S.NO                  | Description of Go   | ods  | HSN/SAC              | Quantity   | Rate             | Amount      |
| 1                     | DLC   |      |                      | 6.00 cum   | 3200.00          | 19200.00    |
|                       |   |      |                      |            |                  |             |
|                       |   |      |                      |            |                  | Rs 19200.00 |
|                       |   |      |                      |            |                  | N3 13200.00 |
| BANK: UN<br>A/C: 2616 | AILS EMEX INFRA NION BANK OF INDIA 11100001529 DE: UBIN0826162 : RAMPALLE | 1    |                      |            |                  |             |
|                       | t (in words) :  |      | INR Ninteen Thousa   |            | Only<br>OR CEMEX | INEDA       |
|                       |   | "TRU | E COPY"              |            | 100 N            | H+ Charles  |
|                       |   |      |                      | Α          | uthorized Si     | gnatory     |

| Ledger Accou | ınt   |      |          |             |          |
|--------------|-------|------|----------|-------------|----------|
| Date         | DC NO | V.NO | Quantity | Rate        | DLC      |
| 27/08/2022   | 897   | 6351 | 2.00 cum | 3200.00/cum | 6400.00  |
| 27/08/2022   | 898   | 2975 | 2.00 cum | 3200.00/cum | 6400.00  |
| 28/08/2022   | 905   | 2975 | 2.00 cum | 3200.00/cum | 6400.00  |
|              |       |      | 6.00 cum |             | 19200.00 |