PURCHASE DIVISION Advice for approval for credit to supplier

Date:	16875	Prepared t	by	Call	a es	Serial no		
Supplier name		Pnid	10			HO inwa	rd no.	
Firm/Company	Prigater 2211p	Project	and the same of	eel	0	HO recei	ved date	
PO/WO date	16/8/20	PO/WO N	0,	81604	5	Scan ID.		
St no.	Bill no.		Dill			Bill amoun	t	Original attached
1.	672		10/0/	75	0	400/-		UYUS U NO
2.	642		18181	()	λ	(00)		□ Yes □ No
3.								D Yes D No
4.								o Yes o No
	Ils total (Excluding Tra	neport & Ham	ali Chare	ea).			1	
					e Cal	LI blook par	oet o Inc	tallation report
	y by way of: n DCs/bil	II d Steet repo	оп 🗆 юм	C pour repor				
MRN nos.: 2	02302160	145			Proof o matche	f delivery s MRN		Yes a No
Amount B -Oth	er Credits : Transporta	tion charges		1				
Amount C -Oth	er Debits :						1,,-	
Amount D (D=/	A+B-C) – Amount to be	e credited to th	e supplie	r:			8,40	00/-
Amount E - PO	/ WO value:						840	0/-
Amount F – Diff	ference (A – E):						0 (0	
Quantity received	d as per PO/WO	0	Yos o E	xcess receive	ed a Sha	ort received	O Part re	eceíved
Close PO / WO		0	Yes o N	o – wait for	balance	material o	Other	
Payment – due da	atc	(21/8	22				
Remarks:								
	*							
Approved by	Purchase Officer	Purchase Manage		M D		Account	ant	Accounts
Name:	Calman		/					Manager
Sign:	16/8/23	[No.	1					,
Date			.6.50					
approval limit	Upto 20k	Above 20k	S A				1	

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.

TAX INVOICE CASH / CREDIT

Cell: 98495 58805

93987 02763

PRIYANKA PRINTERS

* OFFSET PRINTING * SCREEN PRINTING * LETTER PADS * INVITATIONS * VISTING CARDS * ID CARDS * BROUCHERS * PHAMPLATES *OFFICE FILES *STICKERS ETC.,

	# 9-5-80/2A, Anjaiaha Nagar, Old Bowenpall)11, Telanga	ina State.	
No.					12/8/202	2.
M/s	Summid Soles Common M. G. Rosad, Secu	n Exp	ienies	Up.		
	M. G. Road, Sec	undus	hod:			••••
_	rty GSTIN.					
SI No.	PARTICULARS	HSN Code	Qty	Rate	Amount Rs. F	Ps.
١.	General Inword Register	,	30	280=09	8,400 -	-2
	MRN NO: Regived By: MODI PL	12 (6)		ST		
Rup	Dees Bank: P	Punjab & Sind Ba 03191100022739	Bank	SST	_	+
	Branch : Se	iecunderabad Park Code,; PSIB000031	k Lane	TAL	01100=	29
		/	-		01902 -	-

GSTIN: 36AROPK5593K1Z0

Composite Scheme

Goods once sold Cannot be taken back

For PRIYANKA PRINTERS

Subject to Secunderabad jurisdiction

Purchase Order

From	From Company:	Summit Sales LLP 5-4-187/3&4, IInd FloorSoham MansionM.G.Road Secunderabad,TELANGANA,500003 GSTNO:36ACQFS2044C1Z7	lansionN 0003	I.G.Roac	_									
Supp	Supplier Details													
Priya 9-5-8	Priyanka Printers 9-5-80/2A, Anjaiaha Na	Priyanka Printers 9-5-80/2A, Anjaiaha Nagar, Old Bowenpally, Hyderabad					PO No		20230816045	45	Quote No			
Hyde GSTI Mr V	Hyderabad, TG, 500011 GSTIN:36AROPK5593K1Z0 Mr Veni 9849558805	K1Z0					PO Date		16 Aug 2023	33	Quote Date	0	16 Aug 2023	
,	, , , , , , , , , , , , , , , , , , , ,						Supply Type	be			Requisition Num	Mum r	20230816023	
SNo.	SNo. Item Name		Qty	Rate	Dis%	Taxable Amount			%LS9	%			Amount	
							%LS9I	CGST%	%LSSS	IGST AMT	CGST AMT	SGST AMT		
_	PROM1797-Pron 200pages-Nos	PROM1797-Promotions-Pre Printed Site Register200pages-Nos	30.00	30.00 280.00	%0	8,400	%0	%0	%0	0	0	0	8,4	8,400
Addl	General Inward Register for HO	Register for HO												
								Total	Total Amount	0	0	0	8,4	8,400
Rupe	es in words: Eight	Rupees in words: Eight Thousand Four Hundred Only.												

Terms and Conditions:-

General Inward Register for HO Additional Specifications Inclusive of GST and other taxes.

Within ____ days of PO Delivery Date:

As given above. Delivery Location:

Nil. / ___ % of PO value. By Vendor or Purchaser Advance Paid: Transport:

Within ____ days of delivery and on submission of bills. Payment Terms:

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