

Weekly - Petty cash /expense card statement.

Name		K Suneel Kumar		Statement date	18-04-2025 Card No.4629 5254 2716 5724		
Prepared by		K Suneel Kumar		Sign			
From period		11-04-2025		To period	17-04-2025		

Sl No	Debit to company	Debit to project	Description of expense	Amount	Bill enclosed	GST bill
1.	AMTZ	AMTZ	RAM battery purchased	4700	☐ Y ☐ N	☐ Y ☐ N
2.	AMTZ	AMTZ	Toner refilling	325	☐ Y ☐ N	☐ Y ☐ N
3.					☐ Y ☐ N	☐ Y ☐ N
4.					☐ Y ☐ N	☐ Y ☐ N
5.					☐ Y ☐ N	☐ Y ☐ N
6.					☐ Y ☐ N	☐ Y ☐ N
7.					☐ Y ☐ N	☐ Y ☐ N
8.					☐ Y ☐ N	☐ Y ☐ N
9.					☐ Y ☐ N	☐ Y ☐ N
10.					☐ Y ☐ N	☐ Y ☐ N
11.	Total			5025		

Amount to be credited by	☐ Transfer to expense card, ☐ Cash reimbursement, ☐ Transfer to personal a/c. ☐ Other:	
Approved by:	Div. Manager	Accounts Manager
Sign:		
Date:		

Notes: 1. Scanned copy of this statement to be submitted before every Friday 2pm. 2. Original vouchers to be attached to this statement and send to respective accountant by Monday. 3. Accountants to make payment on receipt of scanned statement on Saturday. 4. If original statement with vouchers of last week is not received withhold further payment and salary. 5. Employee must maintain photocopy of all bills/vouchers for 3 months. 6. Division manager and accounts manager approval required for expenses of over 2,000/- per week. MDs approval is required for expenses of over 10,000/- per week

M/s. VIVID WORLD

A Complete Solution for all your cartridge needs

Flat No. 503, G2 Block, Indu Aranaya Pallavi Apts., Bandlaguda,
Nagole, Hyderabad – 500 068, Telangana State. Tel : +91-9246215868

BILL OF SUPPLY

Invoice No. : 2962

Invoice Date : 12/04/2025

Reverse Charge (Y/N) :

State : TELANGANA

Code

Transport Mode :

Vehicle Number :

Date of Supply :

Bill to Party

Address: M/S. AMTZ MEDIPOLIS PVT LTD ,
5-4-187/3&4,2ND FLOOR, SOHAM MANSION , MGRD,SECBAD.

Ship to Party

State : TELANGANA

State :

Code

Product Description

U
O
M

Qty

Rate

Amount

TOTAL

HP 12A LASER TONER REFILLING

01

225.00

225.00

225.00

HP 12A LASER TONER BLADE

01

100.00

100.00

100.00

325.00

325.00

RS. THREE HUNDRED AND TWENTY FIVE ONLY.....

(RS.325.00)

325.00

325.00

Bank Details

Bank Name : INDIAN BANK

Branch : Narayanguda Branch

Bank A/C : 406746378

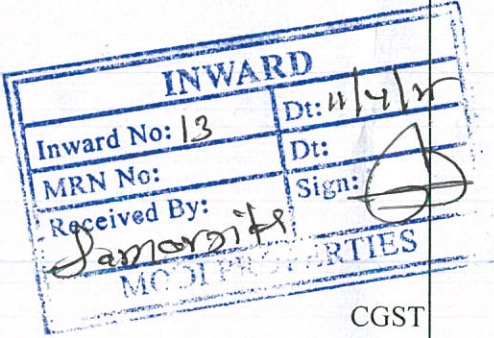
Bank IFSC : IDIB000N015

Common Seal

Certified that the particulars given above are true and correct

For VIVID WORLD

Authorized Signatory

Tax Invoice								
Ace Business Solutions #NRSC Colony, Hydernagar, Hyderabad-500 082 GSTIN: 36ANLPK6297R1ZU State : Telangana. Ph:-8555004783		Invoice No. 03/25-26		Dated 11-04-2025				
		Delivery Note		Mode/Terms of Payment				
		Reference No. & Date:		Other References				
Buyer (Bill to) AMTZ Medpolis Square Pvt Ltd., 2nd Floor, 5-4-187/3&4, M.G. Road, Ranigunj, Secunderabad, Telangana - 500003. GSTIN: 36AAXCA5159L1ZV		Buyer's Order No.		Dated				
		Dispatch Doc No.		Delivery Note Date				
		Dispatched through		Destination				
SI No.	Description of goods	HSN/SAC	Qty	Rate	per	Amount		
1	16GB DDR4 RAM	8473303	1	2118.64	18%	2,118.64		
2	HP J04 Battery	85076000	1	1,864.41	18%	1,864.41		
		CGST				358.47		
		SGST				358.47		
		Rounded off					0.00	
						4,700.00		
Amount (in words) Four Thousand Seven Hundred Only						E. & O.E		
Taxable Value		IGST		CGST		SGST		Total Tax Amount
		Rate	Amt	Rate	Amt	Rate	Amt	
3,983.05								
		0%	0.00	9%	358.47	0%	358.47	716.95
				Company's Bank Details:				
				Bank Name: State Bank of India IFSC CODE : SBIN0011665 Branch: Hydernagar				
Receiver Signature				For Ace Business Solutions				
				 Authorized Signatory				