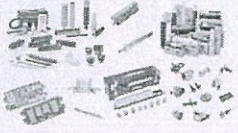


Weekly - Petty cash /expense card statement.

Name	K Suneel Kumar		Statement date	18-07-2025 Card No.4629 5254 2716 5724		
Prepared by	K Suneel Kumar		Sign	<i>SJ</i>		
From period	11-07-2025		To period	17-07-2025		
SI No	Debit to company	Debit to project	Description of expense	Amount	Bill enclosed	GST bill
1.	MPSVC	MPSVC	Toner refilling	2000	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
2.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
3.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
4.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
5.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
6.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
7.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
8.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
9.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
10.					<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N
11.	Total			2000		
Amount to be credited by <input type="checkbox"/> Transfer to expense card, <input type="checkbox"/> Cash reimbursement, <input type="checkbox"/> Transfer to personal a/c. <input type="checkbox"/> Other:						
Approved by:			Div. Manager	Accountant	Accounts Manager	MD
Sign:			<i>SJ</i>			
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



V-IT CONSUMABLES AND SPARES

(A ONE STOP SOLUTION)

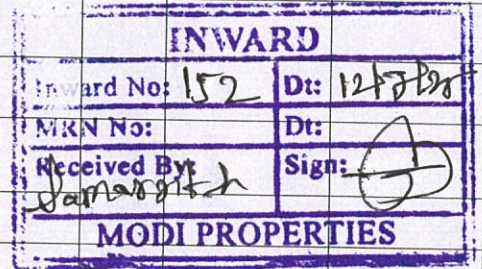


INVOICE/ CASH BILL

Sellers Name :	M/S.V-IT CONSUMBALES AND SPARES	Date	12/07/25
Address :	CHAPPAL BAZAR , KACHIGUDA.	INVOICE NO	1673
Telephone No :	9246215868	UDYAM REGISTRATION NUMBER	UDYAM-TS-02-0006461
Buyer's Name :	M/S. MODI PROPERTIES PVT LTD- SERVICES ,		
Address :	SOHAM MANSION , MG ROAD , SECBAD.		

Terms of Sale

S.No.	DESCRIPTION OF GOODS	Qty	Rate	Value (Rs.)
1)	REFILLING OF TONERS HP12A	05	225.00	1125.00
	HP88A	02	225.00	450.00
2)	LASER TONER DRUMS HP12A	01	325.00	325.00
3)	EPSON I3252 PRINTER BLACK			
4)	LASER TONER BLADE HP12A	01	100.00	100.00
5)	LASER TONER PCR			
6)	LASER TONER MAGNET			
7)	HP1005 MFP PRINTER FUSER UNIT REPLACEMENT & SERVICE CHARGES			
8)	HPQ2612A LASER TONER CARTRIDGE NEW- COMPATIBLE			
9)	EPSON L3252 PRINTER INK PADS CLEANINGWITH SOFTWARE UPDATION AND HEAD REPAIR AND GENERAL SERVICE			
10)	CANON LBP 2900 PRINTER PRESSURE ROLLER AND TEFLON SHEET CHANGE			
	TOTAL			2000.00



FOR M/S.V-IT CONSUMABLES AND SPARES

AUTHORISED SIGNATORY

D.NO:3-3-66/303 SAI SHIKARA HEIGHTS, CHAPPAL BAZAR, KACHIGUDA, HYDERABAD-500027 - CALL@9246215868

SL