

PURCHASE DIVISION
Advice for approval for credit to supplier

Date:		20/5/2020		Prepared by:		K. R. Chagula	
PO/WO no.		67091		PO / WO Date.		12/5/2020	
Supplier Name		SSLLR		PO/WO amount		330/-	
Firm/Company		Modi Realty Genome Valley UG		Project		Genome Valley	
Sl. No.	Bill No.	Bill Date		Bill amount			
1.	11266	20/5/2020		330/-			
2.							
3.							
Amount A – Bills total(Excluding Transport & Hamali Charges):						330/-	
Sl. No.	DC No	DC. Date	MRN No.	DC matches MRN			
1.	9388	20/5/2020	79160	☒ Yes ☐ No			
2.				☐ Yes ☐ No			
3.				☐ Yes ☐ No			
4.				☐ Yes ☐ No			
Amount B – Other Credits :							
Amount C – Other Debits :							
Amount D (D=A+B-C) – Amount to be credited to the supplier:						330/-	
Amount E – PO / WO value:						330/-	
Amount F – Difference (A – E):							
Quantity received as per PO / WO			☒ Yes ☐ Excess received ☐ Short received ☐ Other (explained below)				
Is difference between PO / Bill acceptable?			☒ Yes ☐ No (explained below)				
Excess / short material received			☒ Approved – within acceptable limits ☐ No (explained below)				
Close PO / W?O			☒ Yes ☐ No – wait for balance material ☐ No (explained below)				
Advance paid / PDC given (deduct when paying)			☐ Yes – Rs. _____ /- ☒ No				
Payment – due date			25/5/2020				
Remarks:							
Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:							
Date	20/5/2020	26/5	26/5/2020		26/5/2020		

Notes: 1. In case amount to be credited to supplier and the bills total does not match prepare JV for debit or credit. 2. Attach additional sheets if quantity of bills or DCs is more than the space provided. Clearly mark the space provided with 'see attachment'. 3. Purchase Officer can approve Pos/Wo upto Rs. 5,000/-, Purchase Manager upto 25,000/- and Purchase Director thereafter. 4. Attach JV, Office copy of PO/WO, DCs and bills to this advice. 5. In Amount A, exclude transport, Hamali charges, etc and instead include in Amount B. 6. To be approved by accounts manager if bill value exceeds Rs. 10,000/-

TAX INVOICE

ORIGINAL INVOICE

Summit Sales LLP

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

Email: purchase@modiproperties.com

Supplier / Customer / Transporter - Copy

GSTIN/UNI: 36ACQES2044C1Z7

1 of 1 : 20-05-2020

Customer Details

Modi Realty Genome Valley LLP

Sy no. 31 & 32, murharipally, Genome Valley, Hyderabad

Invoice No. 11266

Invoice Date. 20-05-2020

PO No. 67091

PO Date. 12-05-2020

Req ID 56773

Req Date 12-05-2020

Loc Req No 94672

GSTIN : 36ABFFM3063P1ZU

	Description of Goods	HSN/SAC	Qty	Rate	Gross	Tax%	Tax Amt
1	9600 - Tools - mask - NA - Nos		4	70.00	280.00	18	50.40
	Face Sheild						
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
IGST				Total Taxable Amount		280.00	50.40
CGST				Total Invoice Amount		330.40	
SGST							
25.20							
25.20							

Rupees : Three Hundred Thirty and Paise Fourty Only.

for Summit Sales LLP

Authorised signatory

Subject to Hyderabad Jurisdiction

Purchase Order

Page(s) 1 Of 1

12-05-2020 3:40:37 PM



From Company : **Modi Realty Genome Valley LLP**
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003
G S T No. : 36ABFFM3063P1ZU

Supplier Details

Summit Sales LLP
5-4-187/3&4, II nd floor, Soham Mansion, MG Road, Secunderabad

GSTIN 36ACQFS2044C1Z7

040-66335551

9618244433

Doc No	67091	94672
Doc Date	12-05-2020	
Quote No	Nil	
Quote Date	12-05-2020	
SupplyType	Supply	

Kind Attn : Hamendra, Prabhakar

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 9600 - Tools - mask - NA - Nos Face Sheild	4.00	70.00	0.00	18.00	330.40
Total Order Value . . .					330.40
Rupees : Three Hundred Thirty and Paise Fourty Only.					

Terms and Conditions :-**Specification / Brand** As per details given in the quotation.**Payment Terms** After Delivery & Production of bill**Tax** Inclusive of all taxes**Delivery Date** Next Day.**Delivery Location** Genome Valley
Shamirpet, Hyderabad.
Phone. 9502211011**Penalty For Delay** Nil**Transportation Cost** Transport cost shall be borne by us.**Warranty** Nil**Advance Paid** Nil**Other Terms** We reserve the right items not confirming to qty & specs. Above order for Labour and staff safety use purpose**Completion Date** Nil**Measurment** Nil**Security** Nil**Remarks**For **Modi Realty Genome Valley LLP**

Authorised Signatory

Name : _____

Accepted the above Terms And Conditions

For **Summit Sales LLP**

Name : _____

Date : ____/____/____

Requisition Form

Company Name:		Modi Realty Genome Valley		Date:		09.05.2020	
Site & Phase :		BRGV		Time:		09:00	
Supplier				Req. No.		9467 2	
Material required before date:		10.05.2020		ID No.		56773	
No	Description	Size	Quantity	Units	Inward No	Date	
1	Face Shield	STD	04	nos			
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
Remarks: For staff use							
Prepared By		Pushpalatha		Approved by		Nikhil	
Sign. & Date		09.05.2020		Sign. & Date		009.05.2020	

Note: On receipt of material at site write inward number and date in last 2 columns



DELIVERY CHALLAN

Summit Sales LLP

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DC Date. 20-05-2020

PO No. 67091

PO Date. 12-05-2020

Req ID 56773

Req Date 12-05-2020

Loc Req No 94672

GSTIN : 36ABFFM3063P1ZU

Description of Goods

HSN/SAC

Qty

1 9600 - Tools - mask - NA - Nos

4

2

3

4

5

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8

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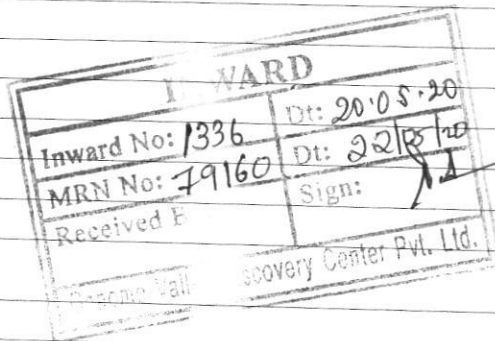
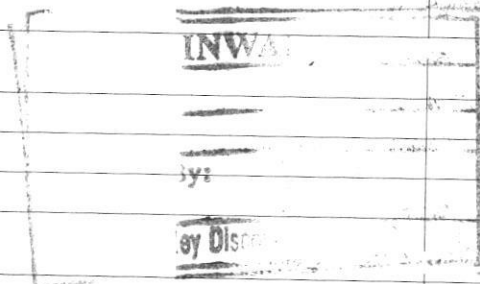
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for Summit Sales LLP

Authorised signatory

Subject to Hyderabad Jurisdiction

TAX INVOICE

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

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Face Shield

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IGST	CGST	SGST	Total Taxable Amount	280.00			50.40
	25.20	25.20	Total Invoice Amount	330.40			

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