PURCHASE DIVISION Advice for approval for credit to supplier

Date:		1	1			D	1.1					
PO/WO n	0.	15/6/20				Prepared by:			v. Parali			
Supplier Name				PO / WO Date.			92/5/20					
VIVID WOTED					PO/WO amount			3841-				
Sl. No.		Summi	elas t	oded &	P				guluze			
SI. No. Bill No.						Bill Date			Bill amount			
2.		1686				22	5/20		384/_			
				0								
3.		¥8										
4.				10								
Amount A	– Bills tot	al(Excluding 7	Transport &	& Hamali	Charge	es):	ă .		3841-			
Sl. No.	DC No	14	DC	. Date	MRN No.			No.	DC matches MRN			
1.					19931		31	∪Yes □ No				
2.					=				□ Yes □ No			
3.									□ Yes □ No			
4.									□ Yes □ No			
Amount B	-Other Cre	dits:_										
Amount C -	Other Del	oits:										
Amount D	D=A+B-C) – Amount to	be credite	ed to the s	upplier	·:						
Amount E -	PO / WO	value:							3841-			
Amount F -	Difference	e (A – E):							384/-			
Quantity rec	eived as p	er PO /WO		1	≥Ye	es 🗆 Exce	ess receiv	red - Short red	eived Other (exp	1-1-11-1		
Is difference	between I	PO / Bill accep	otable?					below)	erved Other (exp	lained below)		
Excess / sho		_										
Close PO / V	V?O								ts No (explained			
Advance pai	d / PDC oi	ven (deduct w	hen navin	a)					ial No (explained	l below)		
Payment – d		ven (deddet w	—————	g) 	□ Ye	es – Rs <u>.</u>	/-ON	No				
Remarks:				19/6/20								
temarks <u>.</u>												
		· · · · · · · · · · · · · · · · · · ·								E		
		i di							ą s			
Approved by	Purc Off		urchase lanager	Procure Mana		M	D	Accounts – receiver of	Accountant	Accounts Manager		
ign:	N. Ro	they	8					bill	2			
Pate	15/6/	20 15	6									
. 1 7	1210		1			1			1			

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/Wos upto Rs. 5,000/-, Purchase Manager and Procurement Manager to approve all bills from 5,000/- to 1,00,000/- . 4. Attach JV, Office copy of PO/WO, DCs and bills to this advice. 5. In Amount A, exclude

M/s. VIVID WORLD

A Complete Solution for all your cartridge needs

80/2/201

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

GSTIN: 36AVTPS1528D1ZB

TAX INVOICE

Invoice No.: 1686	Transport Mode :												
Invoice Date: 22/05/2020	Vehicle Number :												
Reverse Charge (Y/N):						Date of Supply :							
State: TELANGANA	Coc	le		36									
Bill to Party				Ship to	Party	/							
Address: M/S. SUMMIT SALES LLP ,					GATE P	ASS NO:	1020						
5-4-187/3&4 , 2 ND FLOOR, SOHAM MAN	SION,												
MG ROAD, SECBAD.													
GST: 36ACQFS2044C1Z7					GSTIN:								
State : TELANGANA			Co de		State :						Co de		
Product Description	HSN Code	U 0 M	Qty	Rate	Amount	TAXABLE VALUE	CGST	* 22		SGST	TOTAL		
							RATE	AMT	- RA TE	AMT			
RICOH LASER TONER REFILLING	3773		01	325.00	325.00	58.50	9%	29.25	9%	29.25	383.50		
3										Major			
f INWARD	troposte months	POST PROPERTY.	1										
The same of the sa	3/05	2											
WRN NOT 1993	S PS	elone in f	76		<u> </u>				1				
Received By: Olgo:	1	awange.	opposite a second										
Lowent	()		Mary Mary Company of the Company of										
The state of the s	harane adamin.	garane.	100,000			40.50			-		202.50		
	ESPECIAL PROPERTY OF THE PERSON OF THE PERSO	erongerti.	1		325.00	58.50			- 1		383.50		
				//QTI	ES						325.00		
RS. THREE HUNDRED EIGHTY THREE AND F	TETV	PAIS	SF O	NI 3	00 121					29.25			
(RS.383.50)				1 110: bb	100	ADD: SGST 9%					29.25		
(NS.303.50)				O Signs	V)+	Total Amour	nt After Tax				383.50		
				SE	C'P.	GST on Rev			JEN				
Bank Details					4		Certified th	1101		121	rue and correct		
Bank Name : INDIAN BANk								Eor V	VAND!	WORLD			
Branch : Narayanguda Branch		(1					113	Jest 1	1011			
Bank A/C : 406746378		_	21					Antho	rized	ignatory			
Bank IFSC : IDIB000N015			Com	mon Seal				, april	31.0				

05-06-2020 11:45:21

From Company : Summit Sales LLP

5-4-187/3&4,II nd floor,MG Road, Secunderabad-500003. G S T No.: 36ACQFS2044C1Z7

03.06.20 12:48:13

Supplier Details

Vivid World

204, Kubera Towers, Narayanaguda, Hyderabad.

Doc No 67761 Doc Date

16220

Quote No

22-05-2020

Nil

Quote Date SupplyType

22-05-2020 Supply

6682-3161/6682-3171 92462-15868

Kind Attn: Mr. Vishal

GSTIN 36AVTPS1528D1ZB

Purchase Order for the Supply of following Items.

Item Name					
1 3522 - Computers and Peripherals - Toner drum - NA - nos	Qty 1.00	Rate	Dis%	GST	Amount
nos - Toner drum - NA -		325.00			ranount
	1.00	323.00	0.00	18.00	383.50
Rupees: Three Hundred Eighty Three and Paise Fifty Only.		Total Or	der Value	·	383.50

Terms and Conditions :-

Specification / Brand As per details given in the quotation

Payment Terms

After Delivery & Production of bill

Tax

All taxes included in above price.

Delivery Date

Same Day

Delivery Location

Head Office

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

Phone. 040-66335551

Penality For Delay

Nil

Transportation Cost

Included in the above price.

Warranty

Nil

Advance Paid

Nil

Other Terms

We reserve the right items not conforming to quality and specifications. Above order for site office use purpose Nil

Completion Date

Measurment Security

Nil Nil

Remarks

For Summit Sales LLP

Authorised Signator

Accepted the above Terms And Conditions For Vivid World

Date : __/__/_

Requisition Form

Com	pany Name:	s LLP	Date:			23-05-2020				
Site	& Phase :	Time:								
Supp	lier	SSLLP		Req. No.			16220			
Material required before date:				ID No.			57432			
No Description			Size	Qu	antity	Units	Inward No	Date		
1	Ricoh Lazer				1	No				
2						14				
3										
4										
5										
6										
7										
8										
9					Adp	ROVED				
10	a .				AP	2				
Rem	arks: This is for purchase				05	KRN ZUZU				
Prepa	ared By	K.Suneel		Approved by MINISH PARIKH						
Sign	& Date	23-05-2020		Sign. & DateMANAGER PROCUREMENT						

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

Requisition Form

Company Name:	1	Date:			
ite & Phase :	,	Гime:			
upplier]	Req. No.			
Material required before date:]	ID No.			
No Description	Size	Quantity	Units	Inward No	Date
1					
2					
3					
4					
5					
6					
7					
8					
9					
0					
emarks:					
repared By	l A	Approved by			
gn.& Date ote: On receipt of material at site write inward i	S	Sign. & Date			