PURCHASE DIVISION

Advice for approval for credit to supplier

Date:	16/7/20.	Prepared by:	SOWMYA
PO/WO no.	68699.	PO / WO Date.	7/7/20
Supplier Name	OM Sree Medisurge Inc	PO/WO amount	3,068
Firm/Company	SSllp	Project	Shllp.
Sl. No.	Bill No.	Bill Date	Bill amount
1.	OF04197	7/7/20.	3,068
2.			
3.			
Amount A – Bills total(Excluding Transport & Hamali Charges):			3,068

Sl. No.	DC No	DC. Date	MRN No.	DC matches MRN
1.			80157	☑ 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:	3,068
Amount E – PO / WO value:	3,068
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	**18.7.2020**
Remarks:	

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	Sowmya						
Date	16/7/20						

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 transport, Hamali charges, etc and instead include in Amount B. 6. To be approved by accounts manager if bill value exceeds Rs. 10,000/- 7. MD to approve all bills above 1,00,000/-

TAX INVOICE

OM SREE MEDISURGE INC

PLOT NO.66C,GROUND FLOOR,ADDAGUTTA SOCIETY,
WESTERN HILLS,KUKATPALLY,HYDERABAD-72. Bank:HDFC A/CNO:16392560000277,IFSC HDFC0001639
Phone :48552762,7416097446,9985056542 Mail ID: omsreemedisurge@gmail.com

GST No : 36AABFO8145K1ZZ
D.L No 21B: 424/RR/AP/2008/W

To :**VISTA HOMES**
5-4-187/3 &4 2nd FLOOR, M.G ROAD
SECUNDERABAD
HYDERABAD Ph:

Code : VISTAH
DL Nos :
Gst No : 36AAGFV2068P1ZJ
RepName:TRILOK CHAND Ph:9866244440

TaxInvNo : OF04197
InvDate : 07/07/2020
Type : Credit

S.No.	MFG	Product Name	Pack	HsnCode	Batch	Expriy	Qty	Free	M.R.P	Rate	Amount	GST%
1	PEPTAS	HAND SANITIZER STAND	1		001	01/2023	2		2500.00	1300.00	2600.00	18.00

68699

INWARD
Inward No: 24938 Dt: 09/7/20
MRN No: 80157 Dt:
Received By: Sign:
Vista Homes

MODI PROPERTIES PVT. LTD. SECBAD
INWARD
No. 67439
Date 29/7
Sign.

Note : ***3ply Face Masks, PPE Kits, Hand Sanitizers 100-500Ml & 5Lts Availab

	CGST% VALUE	CGST AMT	SGST% VALUE	SGST AMT
0% :	0.00		0.00	
5% :	0.00	0.00	0.00	0.00
12%:	0.00	0.00	0.00	0.00
18%:	1300.00	234.00	1300.00	234.00
28%:	0.00	0.00	0.00	0.00

No.of Items:	1	SubTotal:	2600.00
No.of Units:	2	Less Disc:	0.00
(-/+)Adjust:	0.00	Gst Amt:	468.00
Rounding :	0.00		

Three Thousand Sixty Eight Rupees Only

NET PAYABLE: **3068.00**

The goods supplied in this invoice do not contravene
section 18 of the drugs & cosmetics act 1940.
Subject To HYDERABAD Jurisdiction. E.&O.E.

For OM SREE MEDISURGE INC

Customer Signatory Authorized

Purchase Order

 07-Jul-20 3:18:13 PM

68699
06.07.20 2:23:37

From Company : **Vista Homes**
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003
G S T No. : 36AAGFV2068P1ZJ

Supplier Details			
Om Sree Medisurge Inc	**Doc No**	68699	99623
Plot 66C, ground floor, Addagutta society, Western hills, Kuatpally, Hyderabad-500072.	**Doc Date**	07-07-2020	
	Quote No	Nil	
GSTIN 36AABFO8145K1ZZ	**Quote Date**	07-07-2020	
040-48552762 7416097446	**SupplyType**	Supply	

Kind Attn : Trilok

Purchase Order for the Supply of following Items.

	Item Name	Qty	Rate	Dis%	GST	Amount
1	6202 - Miscellaneous - Sanitizer Dispenser Stand - NA - Nos	2.00	1,300.00	0.00	18.00	3,068.00
	Total Order Value . . .					**3,068.00**

Rupees : Three Thousand Sixty Eight Only.

Terms and Conditions :-

Specification / Brand	Branded one about 3' heightx 2 1/2" thickness.
Payment Terms	After delivery
Tax	Included in the above prices
Delivery Date	With in two days
Delivery Location	Vista Homes Sy. No. 193, Kapra, Hyd. From ECIL take left in lane opposite MRR school Phone. Contact: 8790166611
Penality For Delay	Nil
Transportation Cost	Nil
Warranty	Nil
Advance Paid	Nil
Other Terms	We reserve the rights to reject the items if not as specified above order is for site use purpose.
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	Nil

For ***Vista Homes***

Authorised Signatory

Name : ____________________

Accepted the above Terms And Conditions

For ***Om Sree Medisurge Inc***

Name : ____________________

Date : __/__/____

VISTA

Requisition Form

Company Name:	Vista Homes 0A	Date:	06.06.2020
Site & Phase :	Vista Homes	Time:	18:00 PM
Supplier		Req. No.	99623
Material required before date:	09.06.2020	ID No.	57506

No	Description	Size	Quantity	Units	Inward No	Date
1	Sanitizer Stand		02	No's		
2						
3						
4						
5						
6						
7						
8						
9						
10						

6869

Remarks: For Site Use purpose

Prepared By	T.MADHU	Approved by	
Sign.& Date	06.06.2020	Sign. & Date	

APPROVED BY
13 JUN 2020
SOHAM MODI
MANAGING DIRECTOR

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