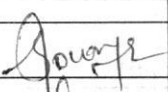


**PURCHASE DIVISION**  
Advice for approval for credit to supplier

|                                                               |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----------------------------|-------------|------------------|
| Date:                                                         |                                                                                     | 18/7/20.          |                                                                                                                                                                           | Prepared by:                                                        |                             | SOWMYA      |                  |
| PO/WO no.                                                     |                                                                                     | 68861.            |                                                                                                                                                                           | PO / WO Date.                                                       |                             | 13/7/20.    |                  |
| Supplier Name                                                 |                                                                                     | M/s. Vivid world. |                                                                                                                                                                           | PO/WO amount                                                        |                             | 1,197.70.   |                  |
| Firm/Company                                                  |                                                                                     | Vista homes.      |                                                                                                                                                                           | Project                                                             |                             | Vista homes |                  |
| Sl. No.                                                       | Bill No.                                                                            | 1744              |                                                                                                                                                                           | Bill Date                                                           | 13/7/20.                    |             | Bill amount      |
| 1.                                                            |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             | 11,97.70         |
| 2.                                                            |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| 3.                                                            |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| Amount A – Bills total(Excluding Transport & Hamali Charges): |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             | 1,197.70         |
| Sl. No.                                                       | DC No                                                                               | DC. Date          | MRN No.                                                                                                                                                                   | DC matches MRN                                                      |                             |             |                  |
| 1.                                                            |                                                                                     |                   | 67536                                                                                                                                                                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                             |             |                  |
| 2.                                                            |                                                                                     |                   |                                                                                                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                             |             |                  |
| 3.                                                            |                                                                                     |                   |                                                                                                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                             |             |                  |
| 4.                                                            |                                                                                     |                   |                                                                                                                                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                             |             |                  |
| Amount B – Other Credits :                                    |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| Amount C – Other Debits :                                     |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:   |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             | 1,198            |
| Amount E – PO / WO value:                                     |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             | 1,198            |
| Amount F – Difference (A – E):                                |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| Quantity received as per PO / WO                              |                                                                                     |                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Other (explained below) |                                                                     |                             |             |                  |
| Is difference between PO / Bill acceptable?                   |                                                                                     |                   | <input type="checkbox"/> Yes <input type="checkbox"/> No (explained below)                                                                                                |                                                                     |                             |             |                  |
| Excess / short material received                              |                                                                                     |                   | <input type="checkbox"/> Approved – within acceptable limits <input type="checkbox"/> No (explained below)                                                                |                                                                     |                             |             |                  |
| Close PO / W?O                                                |                                                                                     |                   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> No (explained below)                             |                                                                     |                             |             |                  |
| Advance paid / PDC given (deduct when paying)                 |                                                                                     |                   | <input checked="" type="checkbox"/> Yes – Rs. _____/- <input type="checkbox"/> No                                                                                         |                                                                     |                             |             |                  |
| Payment – due date                                            |                                                                                     |                   | 25.7.2020                                                                                                                                                                 |                                                                     |                             |             |                  |
| Remarks:                                                      |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
|                                                               |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
|                                                               |                                                                                     |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| Approved by                                                   | Purchase Officer                                                                    | Purchase Manager  | Procurement Manager                                                                                                                                                       | M D                                                                 | Accounts – receiver of bill | Accountant  | Accounts Manager |
| Sign:                                                         |  |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |
| Date                                                          | 18/7/20.                                                                            |                   |                                                                                                                                                                           |                                                                     |                             |             |                  |

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/-

# 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

GSTIN : 36AVTPS1528D1ZB

## TAX INVOICE

|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|----------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|--------|------------------------------------------------------------------------------------------------------------|------------------|----------|----------|----------|---------|
| Invoice No. : 1744                                                                                       |             |             |             |        | Transport Mode :                                                                                           |                  |          |          |          |         |
| Invoice Date : 13/07/2020                                                                                |             |             |             |        | Vehicle Number :                                                                                           |                  |          |          |          |         |
| Reverse Charge (Y/N) :                                                                                   |             |             |             |        | Date of Supply :                                                                                           |                  |          |          |          |         |
| State : TELANGANA                                                                                        |             |             | Code        | 36     |                                                                                                            |                  |          |          |          |         |
| Bill to Party                                                                                            |             |             |             |        | Ship to Party                                                                                              |                  |          |          |          |         |
| Address: M/S. VISTA HOMES ,<br>5-4-187/3&4 , 2 <sup>ND</sup> FLOOR , SOHAM MANSION,<br>MG ROAD , SECBAD. |             |             |             |        | GATE PASS NO:1616                                                                                          |                  |          |          |          |         |
| GST: 36AAGFV2068P1ZJ.                                                                                    |             |             |             |        | GSTIN :                                                                                                    |                  |          |          |          |         |
| State : TELANGANA                                                                                        |             |             | Co<br>de    |        | State :                                                                                                    |                  |          | Co<br>de |          |         |
| Product Description                                                                                      | HSN<br>Code | U<br>O<br>M | Qty         | Rate   | Amount                                                                                                     | TAXABLE<br>VALUE | CGST     | SGST     | TOTAL    |         |
|                                                                                                          |             |             |             |        |                                                                                                            |                  | RA<br>TE | AMT      | RA<br>TE | AMT     |
| HP 12A LASER TONER REFILLING                                                                             | 3707        |             | 03          | 230.00 | 690.00                                                                                                     | 124.20           | 9%       | 62.10    | 9%       | 62.10   |
| HP 12A LASER TONER DRUM                                                                                  | 8443        |             | 01          | 325.00 | 325.00                                                                                                     | 58.50            | 9%       | 29.25    | 9%       | 29.25   |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          |         |
|                                                                                                          |             |             |             |        | 1015.00                                                                                                    | 182.70           |          |          |          | 1197.70 |
|                                                                                                          |             |             |             |        |                                                                                                            |                  |          |          |          | 1015.00 |
| RS. ONE THOUSAND ONE HUNDRED NINTY SEVEN AND SEVENTY PAISE ONLY.<br>(RS.1197.70)                         |             |             |             |        | ADD :CGST 9%                                                                                               |                  |          |          |          | 91.35   |
|                                                                                                          |             |             |             |        | ADD :SGST 9%                                                                                               |                  |          |          |          | 91.35   |
|                                                                                                          |             |             |             |        | Total Amount After Tax                                                                                     |                  |          |          |          | 1197.70 |
|                                                                                                          |             |             |             |        | GST on Reverse Charge                                                                                      |                  |          |          |          |         |
| Bank Details                                                                                             |             |             | Common Seal |        | Certified that the particulars given above are true and correct<br>For VIVID WORLD<br>Authorized Signatory |                  |          |          |          |         |
| Bank Name : INDIAN BANK                                                                                  |             |             |             |        |                                                                                                            |                  |          |          |          |         |
| Branch : Narayanguda Branch                                                                              |             |             |             |        |                                                                                                            |                  |          |          |          |         |
| Bank A/C : 406746378                                                                                     |             |             |             |        |                                                                                                            |                  |          |          |          |         |
| Bank IFSC : IDIB000N015                                                                                  |             |             |             |        |                                                                                                            |                  |          |          |          |         |

|                  |             |
|------------------|-------------|
| INWARD           |             |
| Inward No: 24959 | Dt: 14/7/20 |
| MRN No:          | Dt:         |
| Received By:     | Sign:       |
| Vista Homes      |             |

# Purchase Order

Page(s) 1 of 1

15-07-2020 14:08:38

From Company : **Vista Homes**

5-4-187/3 &amp; 4, IIInd Floor, M.G.Road, Secunderabad - 500003

G S T No. : 36AAGFV2068P1ZJ



68861

15.07.20 12:16:58

**Supplier Details**

Vivid World

204, Kubera Towers, Narayanaguda, Hyderabad.

**GSTIN** 36AVTPS1528D1ZB

6682-3161/ 6682-3171

92462-15868

|                   |            |       |
|-------------------|------------|-------|
| <b>Doc No</b>     | 68861      | 99711 |
| <b>Doc Date</b>   | 13-07-2020 |       |
| <b>Quote No</b>   | Nil        |       |
| <b>Quote Date</b> | 13-07-2020 |       |
| <b>SupplyType</b> | Supply     |       |

**Kind Attn : Mr. Vishal**

Purchase Order for the Supply of following Items.

| Item Name                                                             | Qty  | Rate   | Dis% | GST   | Amount          |
|-----------------------------------------------------------------------|------|--------|------|-------|-----------------|
| 1 3523 - Computers and Peripherals - Toner refill - NA - nos<br>12A   | 3.00 | 230.00 | 0.00 | 18.00 | 814.20          |
| 2 3522 - Computers and Peripherals - Toner drum - NA -<br>nos         | 1.00 | 325.00 | 0.00 | 18.00 | 383.50          |
| <b>Total Order Value . . .</b>                                        |      |        |      |       | <b>1,197.70</b> |
| Rupees : One Thousand One Hundred Ninty Seven and Paise Seventy Only. |      |        |      |       |                 |

**Terms and Conditions :-**

|                          |                                                                                                                       |
|--------------------------|-----------------------------------------------------------------------------------------------------------------------|
| <b>Specification /</b>   | As per details given in the quotation                                                                                 |
| <b>Payment Terms</b>     | After Delivery & Production of bill                                                                                   |
| <b>Tax</b>               | All taxes included in above price.                                                                                    |
| <b>Delivery Date</b>     | Same Day                                                                                                              |
| <b>Delivery Location</b> | Vista Homes<br>Sy. No. 193, Kapra, Hyd. From ECIL take left in lane opposite MRR school<br>Phone. Contact: 8790166611 |
| <b>Penalty For Delay</b> | Nil                                                                                                                   |
| <b>Transportation</b>    | Included in the above price.                                                                                          |
| <b>Warranty</b>          | Nil                                                                                                                   |
| <b>Advance Paid</b>      | Nil                                                                                                                   |
| <b>Other Terms</b>       | We reserve the right items not conforming to quality and specifications. Above order for site office use purpose      |
| <b>Completion Date</b>   | Nil                                                                                                                   |
| <b>Measurment</b>        | Nil                                                                                                                   |
| <b>Security</b>          | Nil                                                                                                                   |
| <b>Remarks</b>           |                                                                                                                       |

For **Vista Homes**

Authorised Signatory

Name : 

Contact :-

Accepted the above Terms And Conditions

For **Vivid World**

Name : \_\_\_\_\_

Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

### Requisition Form

|                                |             |          |          |
|--------------------------------|-------------|----------|----------|
| Company Name:                  | Vista Homes | Date:    | 09.07.20 |
| Site & Phase :                 | Vista Homes | Time:    | 13:20    |
| Supplier:                      | -           | Req. No. | 99711    |
| Material required before date: | 11.07.20    | ID No.   | 58372    |

| No | Description         | Size | Quantity | Units | Inward No | Date |
|----|---------------------|------|----------|-------|-----------|------|
| 1  | Cartridge refilling |      | 03       | No's  |           |      |
| 2  |                     |      |          |       |           |      |
| 3  |                     |      |          |       |           |      |
| 4  |                     |      |          |       |           |      |
| 5  |                     |      |          |       |           |      |
| 6  |                     |      |          |       |           |      |
| 7  |                     |      |          |       |           |      |
| 8  |                     |      |          |       |           |      |
| 9  |                     |      |          |       |           |      |
| 10 |                     |      |          |       |           |      |

Remarks: For Site use purpose.

|             |            |              |  |
|-------------|------------|--------------|--|
| Prepared By | T.Madhu    | Approved by  |  |
| Sign.& Date | 09.07.2020 | Sign. & Date |  |

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

### Requisition Form

|                                |             |          |            |
|--------------------------------|-------------|----------|------------|
| Company Name:                  | Vista Homes | Date:    | 06.07.2020 |
| Site & Phase :                 | Vista Homes | Time:    | 11:15      |
| Supplier                       | -           | Req. No. |            |
| Material required before date: | 10.07.2020  | ID No.   |            |

| No | Description | Size | Quantity | Units | Inward No | Date |
|----|-------------|------|----------|-------|-----------|------|
| 1  |             |      |          |       |           |      |
| 2  |             |      |          |       |           |      |
| 3  |             |      |          |       |           |      |
| 4  |             |      |          |       |           |      |
| 5  |             |      |          |       |           |      |
| 6  |             |      |          |       |           |      |
| 7  |             |      |          |       |           |      |
| 8  |             |      |          |       |           |      |

Remarks: For Site Use purpose

|             |            |              |  |
|-------------|------------|--------------|--|
| Prepared By | T.Madhu    | Approved by  |  |
| Sign.& Date | 06.07.2020 | Sign. & Date |  |

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