PURCHASE DIVISION Advice for approval for credit to supplier

Date:			5/0	1/20	٠,	F	repared	by:			SOV	WMYA		
PO/WO no.			67		0	F	PO / WC	Date). ·		+	1/6/20)	
Supplier Nam	ne	Atlas			KSafe	ty gr	PO/WO	amou	nt			1,680.		
Firm/Compan	ıy			16.		F	Project					Shilf)	
Sl. No.	2	Bill No.				F	Bill Date	;			Bill	amount		
1.			644	120	-21		3	91.	20			1,680		and the control of th
2.		***************************************		1										
3.														
4														
Amount A – I	Bills tota	al(Excluding	ng Transp	port & I	Hamali Cl	narges):		and the same		1	,680		
Sl. No.	OC No			DC. D	ate			MRN	No No	١.	DC	matches MR	N	
1.								۶	72	625	K Y	es 🗆 No		
2.	***************************************								<u> </u>		□ Y	es 🗆 No		
3.											□ Y	es 🗆 No		
4.											□ Y	es 🗆 No		
Amount B –C	ther Cr	edits :		1					*************			-		
Amount C -C	ther De	bits:					.3					_		
Amount D (D	=A+B-0	C) – Amou	int to be	credited	to the su	pplier:						1,680		
Amount E – F	PO / WC) value:										1,686		44.00
Amount F – I	Differen	ce (A – E)	•	1814/101-1810-19-19-19-19-19-19-19-19-19-19-19-19-19-								_		
Quantity rece	ived as	per PO /W	0			7 Ye	s \square Exc	ess rec	ceive	ed 🗆 Short re	ceive	d 🗆 Other (e	xpla	ained below)
Is difference b	oetween	PO / Bill	acceptabl	e?		₽ Ye	s 🗆 No	(expla	ined	below)				
Excess / short	materia	al received				□ Ap	proved	- with	nin a	cceptable lin	its 🗆	No (explain	ed t	pelow) .
Close PO / W	?O					⊄ Ye	s 🗆 No -	- wait	for	balance mate	rial c	No (explain	ned	below)
Advance paid	/ PDC	given (ded	uct when	paying)	□ Ye	s – Rs.	/-	9X	Ю	n Barrera and a second			
Payment – du	e date					12.9.	2020	***************************************						
Remarks:	ediates estados estado						-1-1							
Approved	1	ırchase	Purcl		Procure		1	M D		Accounts		Accountan	t	Accounts
by		Officer	Mana	ager	Mana	ager				receiver of bill	ď			Manager
Sign:	8	awy												
Date	1	5/9/20												

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

(ORIGINAL FOR RECIPIENT)

Atlas Security & Safety Inc 4-4-84, Mahankali Street Ranigunj Secunderabad 500 003 GSTIN/UIN: 36AAMFA1505E1ZX State Name: Telangana, Code: 36 E-Mail: atlassecuritysafety@gmail.com

Consignee

Summit Sales LLP

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

-500003.

GSTIN/UIN : 36ACQFS2044C1Z7 State Name : Telangana, Code: 36

Buyer (if other than consignee)

Summit Sales LLP

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

-500003.

GSTIN/UIN

: 36ACQFS2044C1Z7

State Name

: Telangana, Code: 36

Invoice No.	Dated
644/20-21	3-Sep-2020
Delivery Note	Mode/Terms of Payment
Supplier's Ref.	Other Reference(s)
Buyer's Order No.	Dated
67911/14611	11-Jun-2020
Despatch Document No.	Delivery Note Date
Despatched through	Destination

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	First Aid Box	30065000	12 %	2 No	750.00	No		1,500.00
	SGST							90.00
	CGST							90.00
	INWARD			Cartif	ieć by:	A CAMBOOK	1	OPERTIE

Terms of Delivery

Amount Chargeable (in words)

₹ 1,680.00 E. & O.E

Indian Rupees One Thousand Six Hundred Eighty Only

SUMMIT SALES LI

Sign:

Total

Inward No: U831 Dt:

MRN No: 8 2 Received By:

HSN/SAC	Taxable	cable Central Tax		Sta	ate Tax	Total	
	Value	Rate	Amount	Rate	Amount	Tax Amount	
30065000	1,500.00	6%	90.00	6%	90.00	180.00	
Total	1,500.00		90.00		90.00	180.00	

Tax Amount (in words) : Indian Rupees One Hundred Eighty Only

AAMFA1505E

Company's Bank Details

Stores Manag

2 No

Bank Name

36850234809 A/c No. 05542180000100

Company's VAT TIN Company's CST No. CST:SEC/09/01/3201/05-06

Branch & IFS Code: S.D.Road & KKBK0000554

for Atlas Security,

Kotak Mahindra Bank (0554 218 0000 100)

Declaration

Company's PAN

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

11-06-2020 2:02:36 PM

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 12:48:14

Supplier Details					
Atlas Security & Safety Ir	nc	Doc No	67911	14611	
#4-4-84, Mahankali Stree	et, Ranigunj, Secunderabad - 500 003.	Doc Date	11-06-2020		
		Quote No	Nil		
GSTIN 36AAMFA1505E1	IZX	Quote Date	11-06-202	20	
040 - 66333053	9705227773	SupplyType	Supply		

Kind Attn: Mr. Hasnain Khorakiwala

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 4028 - Consumables - First -Aid Kit - NA - boxes	2.00	750.00	0.00	12.00	1,680.00
Rupees : One Thousand Six Hundred Eighty Only.		Total Or	der Value	e	1,680.00

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

Summit Housing LLP

Cherlapally, Behind Kingston PG college, Hyderabad

Phone. 9618244433, Hamendra, 9502266233, Mahesh.

Penality For Delay

Nil

Transportation Cost

Transport cost shall be borne by us.

Warranty

Nil

Advance Paid

Nil

Other Terms

IVII

Other renns

We reserve the right to reject items not conforming to quality and specifications. Above order for Stock use purpose.

Completion Date

Nil

Measurment Security Nil Nil

Remarks

For Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions
For Atlas Security & Safety Inc

Name : ______ Date : _____

Requisition Form Date:

Comp	pany Name:	SSLLP		Requisi	Date:	OHH		10.06.2020		
	& Phase :	SHLLP			Time:			16.00		
Suppl	lier				Req. N	Jo.		14611		
Mate	rial required before date:				ID No			57555		
No	Descr	iption		Siz	ze	Quantity	Units	Inward No	Date	
1	STAMP PAD			BLU	UE	24	NOS			
2	PENCIL BOX					10	NOS			
3	PUNCH			BI	G	5	NOS			
4	STAPLER			BIG	-45	5	NOS			
5	STAPLER PINS			NO-	-10	100	BOXES		100	
6	SCRIBLING PADS					60	NOS			
7_	ACID					36	NOS			
8	ROOM FRESHER				1	20	BAGS			
9	COCONUT BROOMS					30	NOS			
10	DETTOL HANDWASH					48	NOS			
11	WIPER		8 v			15	NOS			
12	GUNNY BAGS					500	BAGS			
15	VIM BAR					36	NOS			
	FIRST AID KIT	6 30				2	NOS			
15	WATER NOTTLES	50HV.) •			36	NOS			
16	STAPLER			NO-	10	30	NOS			
17	PLASTIC SCALE			1		20	MOS			
18	RING BINDER FILE			A3	3	24	NOS			
19	RING BINDER FILE	(A4	ŀ	12	NOS			
20	NOTICE BOARD PINS					6	BOXES			
1	CELLO PENS			BLU	JE	100	NOS			
22	CELLO PENS	2		BLAG	CK	100	NOS			
23	DETTOL ANTISEPTIC I	LIQUID		BIC	3	20	NOS			
emar	ks:For stock maintainanc	e					8		AY	
repar	ed By	SOWMYA	1		Approv	red by		OPROVED	-00	
ign.&	Date	10.06.2020)		Sign. &			APPROVED BY JUN 2020 SOHAM MODICA SOHAM MODICA		