PURCHASE DIVISION Advice for approval for credit to supplier

| Date: | | -1 | | | D | 11 | | T | | |
|---------------------------------|--------------|-------------|---|--------------|---------------------|--------------|--------------|------------------------|--------------|--|
| PO/WO no | 2 | 07/10/ | 2020. | | | Prepared by: | | MINISH. | | |
| Supplier N | | 7079 | 8. | | PO/W | | | 28/09/2020 | | |
| NIVID World | | | PO/WO amount | | | | | | | |
| Firm/Company Mode farm House Hu | | | | Project | | | 657/ | | | |
| Sl. No. | | Bill No. | | 11 | Bill Date | | | Bill amount | | |
| 1. | | 183 | 11 | | 011 | <u> </u> | | | | |
| 2. | | 105 | 4 | | 124 | 09/202 | 0, | 6577 | | |
| 3. | | | | | | | | 1 | | |
| 4. | | | | | | | | | | |
| Amount A | – Bills tot | al(Excludir | g Transport & | Hamali C | 'hargas): | | | | | |
| Sl. No. | DC No | | | Date | marges). | | | Rs. 655/ | | |
| 1. | 20110 | | DC. | . Date | | MRN No |). | DC matches MRN | | |
| 2. | | | | | 5 A | | | □ Yes □ No | | |
| 3. | | | | | | | | □ Yes □ No | | |
| Amount B | Other C | 1'4 | | | | | | □ Yes □ No | | |
| | | | | | 20 | | | | | |
| Amount C | | - | S 5 | | | | | | | |
| Amount D | (D=A+B-0 | C) – Amour | nt to be credite | ed to the su | pplier: | | | ^ / | | |
| Amount E | | | | | | | | 607 | | |
| Amount F | - Difference | ce (A – E): | 2 | | | | | 655/1 | | |
| Quantity re | ceived as p | per PO /WO |) | | TYes T Evo | ess receive | d = Short == | ceived Other (expl | | |
| Is difference | e between | PO / Bill a | cceptable? | 1 111 | ✓ Yes □ No | | | (expl | ained below) | |
| Excess / she | | | | | | | - | | | |
| Close PO / | | | | | | | | its □ No (explained | | |
| | | . (1.1 | | 63 ° (r) | ☑ Yes □ No | – wait for b | palance mate | rial □ No (explained | below) | |
| 4 | _ | given (dedu | ct when payin | ıg) | □ Yes – Rs <u>.</u> | /- [| no No | | | |
| Payment - | due date | | = = | | 10/10/2 | 020 | | | | |
| Remarks: | | | | | | 020 | | | | |
| | | | | | ! | | | | | |
| Approved | 1 | rchase | Purchaşe | Procure | ement | MD | Accounts - | - Accountant | Accounts | |
| by | O | fficer | Manager | A Mark | ement iger ED | | receiver o | | Manager | |
| Sign: | | | 285 | 0 / 00 | CT 2020 | | UII | | | |
| Date | | | 200 | | PARIKH | | | 5 | | |
| Notes: 1 | In case om | ount to he | N A A A A A A A A A A A A A A A A A A A | IANAGER P | ROCUREMENT | | | | | |

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

70798

| | | | TA | X IIV | VOIC | L | | | | | |
|---|------------------|-------------|----------|---|--|---------------------------------|------|---------|-------|---------------|--|
| Invoice No.: 1834 | | | | | Transport Mode : | | | | | | |
| Invoice Date: 24/09/2020 Reverse Charge (Y/N): | | | | | Vehicle Number : | | | | | | |
| | | | | | Date of | Supply: | | | | | |
| State: TELANGANA Code 36 | | | | | | | | | | | |
| Bill to Party | Bill to Party | | | | | | | Ship to | Party | | 4 |
| Address: M/S. MODI FARM HOUSE, 5-4-187/3&4, 2 ND FLOOR, SOHAM MANSION, MG ROSECBAD. | | | | , | GATE PASSNO:2178. | | | | | | |
| GST: 36ACQFS2044C1Z7. | | | Ew | | GSTIN: | | | | | | |
| State : TELANGANA | | | Co de | | State : | | | | | | Code |
| Product Description | HSN Code | U O M | Qty | Rate | Amount | TAXABLE VALUE | CGST | | | GST | TOTAL |
| | | | | | | | RATE | AMT | RATE | AMT | |
| HP 12A LASER TONER REFILLING | 3707 | \vdash | 01 | 230.00 | 230.00 | 41.40 | 9% | 20.70 | 9% | 20.70 | 271.40 |
| HP 12A LASER TONER DRUM | 8443 | | 01 | 325.00 | 325.00 | 58.50 | 9% | 29.25 | 9% | 29.25 | 383.50 |
| INWA Inward No: 503 MRN No: Received By: Omorom MOD: FRO RS. SIX HUNDRED FITY FOUR AND NI (RS.654.90.) | Dt: 24 Dt: Sign: | 3 | | INWARD Nobs480 Data-parties Sign | 1011 | 99.90 ADD: CGST 9 ADD: SGST 9 | % | | | | 654.90 555.00 49.95 49.95 654.90 |
| | | | 11. | SEC'B | AO/ | GST on Reve | | | | | |
| Bank Details Bank Name : INDIAN BANk Branch : Narayanguda Branch Bank A/C : 406746378 Bank IFSC : IDIB000N015 | | | | non Seal | Certified that the particulars given above are true and correct Por VIVID WORLD Authorized Signatory | | | | | e and correct | |

Purchase Order

Page(s) 1 Of 1

28-09-2020 14:45:44

21.09.20 12:59:16

From Company: Modi Farm House (Hyderabad) LLP

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

G S T No. : 36

| Supplier Details | | | | | |
|---------------------------------|-------------------|-------------------|------------|-------|--|
| Vivid World | | | | | |
| 204, Kubera Towers, Naraya | naguda. Hyderabad | Doc No | 70798 | 16523 | |
| | 5 may riyaciabad. | Doc Date | 28-09-2020 | | |
| GSTIN 36AVTPS1528D1ZB | | Quote No | Nil | | |
| 6682-3161/6682-3171 92462-15868 | | Quote Date | 28-09-2020 | | |
| | 72402-13008 | SupplyType | Supply | | |
| /: d a | | | | | |

Kind Attn: Mr. Vishal

Purchase Order for the Supply of following Items.

| Item Name | 0. | | | | |
|--|------|----------|-----------|-------|--------|
| 1 3523 - Computers and Peripherals - Toner refill - NA - nos | Qty | Rate | Dis% | GST | Amount |
| - NA - nos | 1.00 | 230.00 | 0.00 | 18.00 | 271.4 |
| 2 3522 - Computers and Peripherals - Toner drum - NA - nos | 1.00 | 325.00 | 0.00 | 18.00 | 383.50 |
| upees: Six Hundred Fifty Four and Paise Ninty Only. | 1 | Total Or | der Value | | 654.90 |

| Terms and | Conditions | - |
|-----------|------------|---|
|-----------|------------|---|

Specification /

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

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

Completion Date

Nil

Measurment

Nil Nil

Security Remarks

For Modi Farm House (Hyderabad) LLP

Authorised Signatory

Accepted the above Terms And Conditions

For Vivid World

| 1 29 09 | 12020 | Name : | |
|---------|-------|--------|--------|
| | | | Date : |

Name: Contact

| Co | mpany Name: | Modi farm Ho | Nec II P | uisition | | | | | |
|-------|----------------------------|----------------------|-----------------|--------------|----------|--------------------|-----------|------|--|
| Site | Site & Phase : Head Office | | - CLF | Da | | | 24-09-20 | | |
| Sup | Supplier | | - Office | | ne: | | | | |
| Mat | terial required before | date: | | | q. No. | | 16523 | | |
| No | | escription | | ID No. | | | | | |
| 1 | 12A toner refilling | Siz | Size Quantity | | Units | GO296 Inward No | Da | | |
| 2 | 12a toner drum | | | | 1 | No | | | |
| 3 | | | | | 1 | No | | | |
| 4 | | | | | | | | 1 | |
| 5 | | | | 6 | | | | | |
| 6 | | | 1020 | | | \ | | | |
| 7 | | | / X | | | A | | | |
| 8 | | | | | | APPRO | VED | | |
| 9 | | | | | | 2 9 SEP | | | |
| 0 | | | | | | | | | |
| | rks: This is for Lavan | Va printer | | | | MINISH F | CUREMENT | | |
| | red By | K.Suneel | | | | | | | |
| gn.& | 2 Date | 24-09-20 | | TI TO S | | | | | |
| ote: | On receipt of material | at site write inward | number and date | Sign. | & Date | | | | |
| | | - | and date | ili iast 2 i | columns. | | | | |
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| | ny Name: | | requis | ition For | rm | | | | |
| | Phase : | | | Time: | | | | | |
| oplie | | | | Req. N | 10 | | | | |
| teria | l required before date | 2: | | ID No. | | | | | |
| | Descr | iption | Size | | | | | | |
| | | - | Size | | Quantity | Units | Inward No | Date | |
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Approved by

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

Prepared By

Sign.& Date