

PURCHASE DIVISION  
Advice for approval for credit to supplier

|                                                               |                  |                         |                                                                                                                                                                           |                                                          |                             |            |                  |
|---------------------------------------------------------------|------------------|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------|------------|------------------|
| Date:                                                         |                  | 03/11/2020              |                                                                                                                                                                           | Prepared by:                                             |                             | NEHA       |                  |
| PO/WO no.                                                     |                  | 71482                   |                                                                                                                                                                           | PO / WO Date.                                            |                             | 21/10/2020 |                  |
| Supplier Name                                                 |                  | Global Safety Solutions |                                                                                                                                                                           | PO/WO amount                                             |                             | 19,824/-   |                  |
| Firm/Company                                                  |                  | SS LLP                  |                                                                                                                                                                           | Project                                                  |                             | SH LLP     |                  |
| Sl. No.                                                       | Bill No.         | Bill Date               |                                                                                                                                                                           | Bill amount                                              |                             |            |                  |
| 1                                                             | 1320             | 24/10/2020              |                                                                                                                                                                           | 19,824/-                                                 |                             |            |                  |
| 2                                                             |                  |                         |                                                                                                                                                                           |                                                          |                             |            |                  |
| 3                                                             |                  |                         |                                                                                                                                                                           |                                                          |                             |            |                  |
| 4                                                             |                  |                         |                                                                                                                                                                           |                                                          |                             |            |                  |
| Amount A – Bills total(Excluding Transport & Hamali Charges): |                  |                         |                                                                                                                                                                           |                                                          |                             | 19,824/-   |                  |
| Sl. No.                                                       | DC No            | DC. Date                | MRN No.                                                                                                                                                                   | DC matches MRN                                           |                             |            |                  |
| 1.                                                            | 1320             | 24/10/2020              | 84025 84515                                                                                                                                                               | <input 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 |                             |            |                  |
| Amount B –Other Credits : Transportation charges              |                  |                         |                                                                                                                                                                           |                                                          |                             | —          |                  |
| Amount C –Other Debits :                                      |                  |                         |                                                                                                                                                                           |                                                          |                             | —          |                  |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:   |                  |                         |                                                                                                                                                                           |                                                          |                             | 19,824/-   |                  |
| Amount E – PO / WO value:                                     |                  |                         |                                                                                                                                                                           |                                                          |                             | 19,824/-   |                  |
| Amount F – Difference (A – E): GST-18%                        |                  |                         |                                                                                                                                                                           |                                                          |                             | —          |                  |
| 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 checked="" 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 type="checkbox"/> Yes – Rs. _____/- <input checked="" type="checkbox"/> No                                                                                         |                                                          |                             |            |                  |
| Payment – due date                                            |                  |                         | 06/11/2020                                                                                                                                                                |                                                          |                             |            |                  |
| Remarks:                                                      |                  |                         |                                                                                                                                                                           |                                                          |                             |            |                  |
|                                                               |                  |                         |                                                                                                                                                                           |                                                          |                             |            |                  |
| Approved by                                                   | Purchase Officer | Purchase Manager        | Procurement Manager                                                                                                                                                       | MD                                                       | Accounts – receiver of bill | Accountant | Accounts Manager |
| Sign:                                                         | NEHA             |                         | 04 NOV 2020                                                                                                                                                               |                                                          |                             |            |                  |
| Date                                                          | 03/11/2020       |                         | MINISH PARIKH                                                                                                                                                             |                                                          |                             |            |                  |

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. 10,000/-, Purchase Manager or Procurement Manager to approve all bills from 10,000/- 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/-

(ORIGINAL FOR RECIPIENT)

79320  
Secunderabad & UTIB0000063  
GLOBAL SAFETY SOLUTIONS  
Authorised Signatory

GSTIN : 36AAOFG9573A1Z5

DELIVERY CHALLAN

☎ : +91 6281248297

+91 9581228898

+91 9502555088

**GSS****GLOBAL SAFETY SOLUTIONS**

Manufacturers Representatives and Marketers of Industrial and Safety Products.

# 5-5-48, Ranigunj, Secunderabad - 500 003. T.S.

E-mail : gss.infoteam@gmail.com

To, M/s. Summit Sales LLPNo. **1320**Date 24/10/20Against your order No. 71482-168059Date 21/10/20.

PARTY GSTIN :

| S. No. | PARTICULARS                                                                                                                                                                                                                                                                                   | QTY.   | RATE  | HSN CODE | TAX |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------|----------|-----|
| 1.     | Cube Testing moulds 6Inch<br><br><br> | 24 nos | 700/- |          |     |

Goods once sold will not be taken back or exchanged.

Received the materials in good condition.

Subject to Secunderabad Jurisdiction

Signature of Customer.

For **GLOBAL SAFETY SOLUTIONS**

## Purchase Order

Page(s) 1 Of 1

28-10-2020 4:28:24 PM



71482

10.10.20 12:36:44

From Company : **Summit Sales LLP**  
5-4-187/3&4, II nd floor, MG Road, Secunderabad-500003.  
G S T No. : 36ACQFS2044C1Z7

### Supplier Details

Global Safety Solutions  
5-5-48, Ranigunj, secunderbad

GSTIN 36AAOFG9573A1Z5

9502555088/9581228898

|            |            |        |
|------------|------------|--------|
| Doc No     | 71482      | 168059 |
| Doc Date   | 21-10-2020 |        |
| Quote No   | Nil        |        |
| Quote Date | 21-10-2020 |        |
| SupplyType | Supply     |        |

**Kind Attn : Mr.Qasim Hussain/AQ Shakir**

Purchase Order for the Supply of following Items.

| Item Name                                         | Qty   | Rate   | Dis% | GST   | Amount    |
|---------------------------------------------------|-------|--------|------|-------|-----------|
| 1 9514 - Tools - Cube testing moulds - 6 In - nos | 24.00 | 700.00 | 0.00 | 18.00 | 19,824.00 |
| Total Order Value . . .                           |       |        |      |       | 19,824.00 |

Rupees : Ninteen Thousand Eight Hundred Twenty Four Only.

### 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<br>Cherlapally, Behind Kingston PG college, Hyderabad<br>Phone. 9618244433, Hamendra, 9502266233, Mahesh. |
| Penalty For Delay     | Nil                                                                                                                          |
| Transportation Cost   | Transport cost shall be borne by us.                                                                                         |
| Warranty              | Nil                                                                                                                          |
| Advance Paid          | Nil                                                                                                                          |
| Other Terms           | We reserve the right to reject items not conforming to quality and specifications. Above order for Stock Purpose             |
| Completion Date       | Nil                                                                                                                          |
| Measurment            | Nil                                                                                                                          |
| Security              | Nil                                                                                                                          |
| Remarks               |                                                                                                                              |

For **Summit Sales LLP**

Authorised Signatory

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

Accepted the above Terms And Conditions

For **Global Safety Solutions**

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

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

# Requisition Form

| Company Name:                  |                           | SSLLP    |          | Date:        |           | 19.10.20 |       |
|--------------------------------|---------------------------|----------|----------|--------------|-----------|----------|-------|
| Site & Phase :                 |                           | SHLLP    |          | Time:        |           | 16.00    |       |
| Supplier                       |                           |          |          | Req. No.     |           | 168059   |       |
| Material required before date: |                           |          |          |              | ID No.    |          | 60908 |
| No                             | Description               | Size     | Quantity | Units        | Inward No | Date     |       |
| 1                              | GREEN HOSE PIPE           |          | 20       | NOS          |           |          |       |
| 2                              | CUBE TESING MOULDS 2.1482 |          | 36       | NOS          |           |          |       |
| 3                              | DOOR MATS-CLOTH           |          | 30       | NOS          |           |          |       |
| 4                              |                           |          |          |              |           |          |       |
| 5                              |                           |          |          |              |           |          |       |
| 6                              |                           |          |          |              |           |          |       |
| 7                              |                           |          |          |              |           |          |       |
| 8                              |                           |          |          |              |           |          |       |
| 9                              |                           |          |          |              |           |          |       |
| 10                             |                           |          |          |              |           |          |       |
| Remarks: FOR STOCK MAINTENANCE |                           |          |          |              |           |          |       |
| Prepared By                    |                           | SOWMYA   |          | Approved by  |           |          |       |
| Sign. & Date                   |                           | 19.10.20 |          | Sign. & Date |           |          |       |

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

APPROVED BY  
19 OCT 2020  
SOHAM MCDI  
MANAGING DIRECTOR.