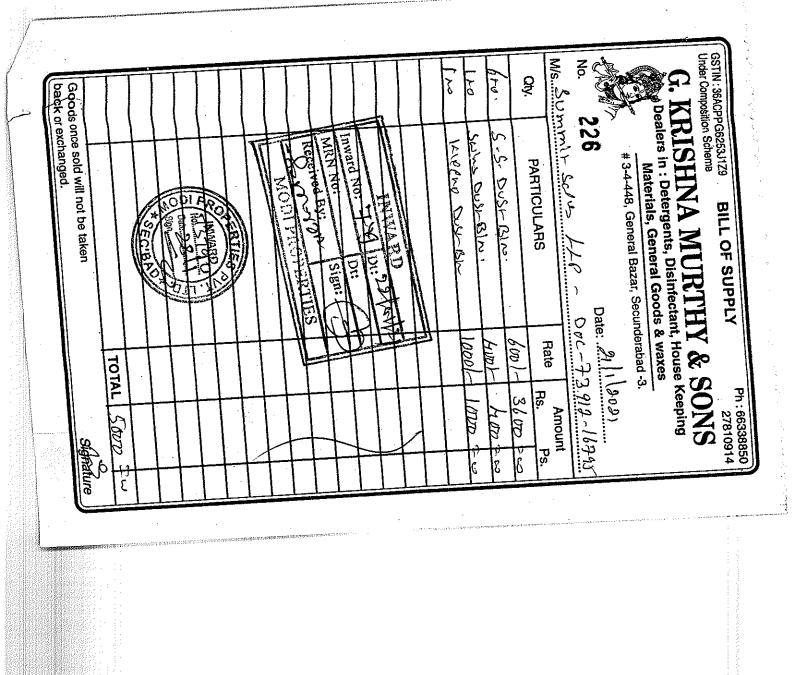
## PURCHASE DIVISION Advice for approval for credit to supplier

Date:		2	a. 1.	, )	<del></del>	Prepare	d by:		PRABH	AVAD
PO/WO no	) <b>.</b>		210			PO/W	•		TRABII	ANAK
Supplier N	ame		912		<u> </u>		-	-	12/1	/21
Firm/Com	nany	Gr. Kai Sunsid	Shra	muril	y 8/00	120/00	amount		4,00	0 0
Sl. No.			كالمصك	121	<u> </u>	Project			4,00 RH11	PI
		Bill No.	· <u> </u>			Bill Dat	e		Bill amount	
3		226				21	1,/2	1	5,00	N-01
4							<del></del>		5,00	<u> </u>
		total(Exclud	ling Trans	port & Ha	mali Charg	ges):			10	7.40
Sl. No.	DC.	Йо		DC. Date	e	<del></del>	MRN	No.	DC matches M	IRN
1.			<u> </u>		7		<del> </del>	/	\□Yes □ No	
2.		1			<del>-/</del>		<del>  ,</del>	/	□ Yes □ No	
3.							<del>                                     </del>		□ Yes □ No	
Amount B	Other	Credits : Tra	ansportation	i on charges	<del></del>				5 703 B 110	
Amount C			····							
Amount D	(D=A-	-B-C) – Amo	ount to be	credited to	the suppli	er•		···		
Amount E									4,000	-10
Amount F	- Diffe	rence (A – E	): GST-18	3%					4,000	r760
		as per PO /V			L To Van T	P	<del></del>			<del></del>
		een PO / Bill		1 <sub>0</sub> 9					d □ Other (explai	ined below)
		erial received		<del></del>	-	No (expl		•		
Close PO /			u 						No (explained be	
					Yes 🗆	No – wai	t for bala	nce material	No (explained b	elow)
		OC given (de	duct when	paying)	□ Yes –	Rs/	-No No		<u> </u>	
Payment -	due da	te			1/	2/2	1			
Remarks:					1	- ( - )	<u>/</u>			
						<del>-</del>				
Approve	d	Purchase	Purch	ase P	rocuremer	nt N	MD	Agganata	<del>                                     </del>	
by 		Officer	Mana		Manager		""	Accounts – receiver of	Accountant	Accounts Manager
Sign:			24		2 FEB 21	021		bill		8**
Date				┪,	IISH PAI					
otes: 1. In c	ase am	ount to be an	271	- MANAG	ER PROCU	DEPRAIT				<u> </u>

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/-



Page(s) 1 Of 1

18-01-2021 3:06:30 PM

73912

16.01.21

Or

10:36:44

From Company: Summit Sales LLP

5-4-187/3&4,II nd floor,MG Road, Secunderabad-500003.

G S T No.: 36ACQFS2044C1Z7

Supplier Details						
6. Krishna Murthy & Sons 4 3-4-448, General Bazar, Secunderabad -3.		<b>Doc No</b> 73912				
# 3-4-446, General Bazar, Se	cunderabad -3.	Doc Date	18-01-2021 Nil			
<b>GSTIN</b> 36ACPPG6253J1Z9		Quote No				
MA 66228050/0701001		Quote Date	te Date 18-01-2021			
5.0 5555555727610914	9849049544	SupplyType	Supply			

Kind Attn: Mr. Raja Shekar

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 4026 - Consumables - Dust bin - NA - nos SS Dust bin 12 I	6.00	600.00	0.00	0.00	3,600.00
2 4026 - Consumables - Dust bin - NA - nos 30 ltrs Blue	1.00	400.00	0.00	0.00	400.00
Rupees : Four Thousand Only.		Total O	der Valu	e	4,000.00

## Terms and Conditions :-

Specification /

All Items shall be of 1st qity.

**Payment Terms** 

After Delivery & Production of bill.

Tax

All taxes included in above price.

**Delivery Date** 

Next 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

Transport cost shall be borne by us.

Narranty 🔪

Nil

Advance Paid

Nii

Other Terms

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

Completion Date Measurment Nil

Security

Nil Nil

Remarks

For Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions

For G. Krishna Murthy & Sons

Name :

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

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

Compa	sition Form any Name:	Summit Calas I V D C		T		$\lambda$			
<b>_</b>		Summit Sales LLP Common Expenses		Date: (W)			02.01.2021 02:52 pm		
Site & Phase:		Head Office		T					
		Time:							
Materia	al required before da			Req. N		16796			
				ID No.					
No	Description			Size	Quantity	Units	62783 Inward No	Date	
01	SS Dust Bin (black colour)			litters	<del>  </del>			Date	
02	Plastic Dust Bin (Black or Grey colour)				06	No's			
00	Plastic Dust Bin	( Black or Grey colour )	10 litters		10	No's			
03 for lunch room			(20) litters		01	No's			
		^	<b>3</b> 0						
		13912				<del></del>	<del> </del>	·	
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Prepared By		Jai Kumar		Approved by			APPROVER P	W- /-	
Sign.& Date		02.01.2021		g: g =			PRONEIL	1 100	
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