

PURCHASE DIVISION
Advice for approval for credit to supplier

Date:		06/01/2021		Prepared by:		Alpha	
PO/WO no.		73257		PO / WO Date.		24/12/2020	
Supplier Name		Atlas Security & Safety		PO/WO amount		4,200/-	
Firm/Company		SSLP		Project		SSLP	
Sl. No.	Bill No.	Bill Date		Bill amount			
1	1368	04/01/2021		4,200/-			
2							
3							
4							
Amount A – Bills total(Excluding Transport & Hamali Charges):						4,200/-	
Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN			
1.			87156	☐ Yes ☐ No			
2.				☐ Yes ☐ No			
3.				☐ Yes ☐ No			
Amount B –Other Credits :_Transportation charges							
Amount C –Other Debits :							
Amount D (D=A+B-C) – Amount to be credited to the supplier:						4,200/-	
Amount E – PO / WO value:						4,200/-	
Amount F – Difference (A – E): GST-18%							
Quantity received as per PO /WO			☒ Yes ☐ Excess received ☐ Short received ☐ Other (explained below)				
Is difference between PO / Bill acceptable?			☒ Yes ☐ No (explained below)				
Excess / short material received			☒ Approved – within acceptable limits ☐ No (explained below)				
Close PO / W?O			☒ Yes ☐ No – wait for balance material ☐ No (explained below)				
Advance paid / PDC given (deduct when paying)			☐ Yes – Rs. ___/- ☒ No				
Payment – due date			11/01/2021				
Remarks:							
Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	Alpha						
Date	06/01/2021	8/1/21	09 JAN 2021				

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)

Sl No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	First Aid Box	30065000	5 No ✓	750.00	No		3,750.00
	SGST						225.00
	CGST						225.00
							
	 INWARD Inward No: 15561 Dt: 4/01/21 M/RN No: 8706 Dt: 5/01/21 Received By: _____ Sign:  SUMMIT SALES LLP						
	Total		5 No				₹ 4,200.00

E. & O.E.

Indian Rupees Four Thousand Two Hundred Only

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
30065000	3,750.00	6%	225.00	6%	225.00	450.00
Total	3,750.00		225.00		225.00	450.00

Tax Amount (in words) : **Indian Rupees Four Hundred Fifty Only**

Company's Bank Details
 Bank Name : Kotak Mahindra Bank (0554 218 0000 100)
 A/c No. : **05542180000100**
 Branch & IFS Code: **S.D.Road & KKBK0000554**

for Atlas Security & Safety Inc

Authorised Signatory

Purchase Order

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26-12-2020 12:27:24

Origin:



23.12.20 11:29:46

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

Supplier Details

Atlas Security & Safety Inc
#4-4-84, Mahankali Street, Ranigunj, Secunderabad - 500 003.

GSTIN 36AAMFA1505E1ZX

040 - 66333053

9705227773

Doc No	73257	168208
Doc Date	24-12-2020	
Quote No	Nil	
Quote Date	24-12-2020	
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	5.00	750.00	0.00	12.00	4,200.00
Total Order Value . . .					4,200.00
Rupees : Four Thousand Two Hundred 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
Cherlapally, Behind Kingston PG college, Hyderabad
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 use purpose.**Completion Date** Nil**Measurement** Nil**Security** Nil**Remarks**For **Summit Sales LLP**

Authorised Signatory

Name : _____

Contact

Accepted the above Terms And Conditions

For **Atlas Security & Safety Inc**

Name : _____

Date : __/__/__

Requisition Form

Company Name:	SSLLP	Date:	11.12.20
Site & Phase :	SHLLP	Time:	11.00
Supplier		Req. No.	168208
Material required before date:		ID No.	62228

No	Description	Size	Quantity	Units	Inward No	Date
1	Labour helmets	Male	100	nos		
2	White helmets 73258		50	nos		
3	Teflon tape 73259		500	nos		
4	Odonil		24	nos		
5	Acid		60	nos		
6	Room freshner		24	nos		
7	Bombay brooms	Big	50	nos		
8	Coconut brooms		100	nos		
9	Dettol liquid		12	nos		
10	Dust bin		12	nos		
11	Dust pan		12	nos		
12	Sponges		500	nos		
13	Mopping stick		30	nos		
14	Pvc bucket with mug		10	nos		
15	Cleaning cloth		120	nos		
16	Mopping cloth		120	nos		
17	Phenoyl		40	nos		
18	Scrubber		24	nos		
19	Lizol		48	nos		
20	Harpic		48	nos		
21	First aid kit 73257		5	nos		

Remarks: Stock maintenance and site use

Prepared By	SOWMYA	Approved by	
Sign. & Date	11.12.2020	Sign. & Date	

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