

PURCHASE DIVISION  
Advice for approval for credit to supplier

② ③

|                                                               |                  |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
|---------------------------------------------------------------|------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------|------------|------------------|
| Date:                                                         |                  | 21/10/21               |                                                                                                                                                                           | Prepared by:                                             |                             | Puehe      |                  |
| PO/WO no.                                                     |                  | 81926                  |                                                                                                                                                                           | PO / WO Date.                                            |                             | 16/10/21   |                  |
| Supplier Name                                                 |                  | Vind world.            |                                                                                                                                                                           | PO/WO amount                                             |                             | 272 /-     |                  |
| Firm/Company                                                  |                  | Mehta & modi Kawkur Up |                                                                                                                                                                           | Project                                                  |                             | H.O        |                  |
| Sl. No.                                                       | Bill No.         | Bill Date              |                                                                                                                                                                           | Bill amount                                              |                             |            |                  |
| 1                                                             | 2186             | 16/10/21               |                                                                                                                                                                           | 272 /-                                                   |                             |            |                  |
| 2                                                             |                  |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
| 3                                                             |                  |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
| 4                                                             |                  |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
| Amount A – Bills total(Excluding Transport & Hamali Charges): |                  |                        |                                                                                                                                                                           |                                                          |                             | 272 /-     |                  |
| Sl. No.                                                       | DC .No           | DC. Date               | MRN No.                                                                                                                                                                   | DC matches MRN                                           |                             |            |                  |
| 1.                                                            |                  |                        |                                                                                                                                                                           | <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:   |                  |                        |                                                                                                                                                                           |                                                          |                             | 272 /-     |                  |
| Amount E – PO / WO value:                                     |                  |                        |                                                                                                                                                                           |                                                          |                             | 272 /-     |                  |
| 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 type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" 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                                            |                  |                        | 25/10/21                                                                                                                                                                  |                                                          |                             |            |                  |
| Remarks:                                                      |                  |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
|                                                               |                  |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
| Approved by                                                   | Purchase Officer | Purchase Manager       | Procurement Manager                                                                                                                                                       | M D                                                      | Accounts – receiver of bill | Accountant | Accounts Manager |
| Sign:                                                         | Puehe            |                        |                                                                                                                                                                           |                                                          |                             |            |                  |
| Date                                                          | 21/10/21         | 21/10/21               |                                                                                                                                                                           |                                                          |                             |            |                  |

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/-

**A Complete Solution for all your cartridge needs**

GSTIN : 36AVTPS1528D1ZB

Invoice No. : 2186

Transport Mode :

Invoice Date :16/10/2021

Vehicle Number :

Reverse Charge (Y/N) :

Date of Supply :

State : TELANGANA

|      |    |
|------|----|
| Code | 36 |
|------|----|

Bill to Party

Ship to Party

Address: M/S. MEHTA & MODI REALTY KOWKUR LLP,  
5-4-187/3&4, 2<sup>ND</sup> FLOOR, SOHAM MANSION,  
MG ROAD , SECBAD.

GATE PASS NO: 2813

**GST:** 36ABLFM7613F1Z3

GSTIN :

State : TELANGANA

Co  
de

State :

Code

|                                 |                          |
|---------------------------------|--------------------------|
| INWARD                          |                          |
| Inward No: 463                  | Dr: 16/10/24             |
| MRN No:                         | Dr:                      |
| Received By: <i>[Signature]</i> | Sign: <i>[Signature]</i> |
| MODI PROPERTIES                 |                          |

RS. TWO HUNDRED SEVENTY ONE AND FORTY PAISE ONLY

(RS .271.40)

IN WARD  
No: 850802  
Date: 22-10-24  
Sign: 

| Bank Details |                      |
|--------------|----------------------|
| Bank Name    | : INDIAN BANK        |
| Branch       | : Narayanguda Branch |
| Bank A/C     | : 406746378          |
| Bank IFSC    | : IDIB000N015        |

Common Seal

Certified that the particulars given above are true and correct

FOR VIVID WORLD

Authorized Signatory



## Purchase Order

From Company : **Mehta & Modi Kowkur LLP**  
5-4-187/3&4, II nd floor, MG Road, Soham Mansion, Secunderabad-500003  
G S T No. : 36ABLFM7631F1Z3

| Supplier Details                                                                                                                    |                   |            |        |
|-------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------|--------|
| Vivid World<br>204, Kubera Towers, Narayanaguda, Hyderabad.<br><br><b>GSTIN</b> 36AVTPS1528D1ZB<br>6682-3161/ 6682-3171 92462-15868 | <b>Doc No</b>     | 81926      | 183236 |
|                                                                                                                                     | <b>Doc Date</b>   | 16-10-2021 |        |
|                                                                                                                                     | <b>Quote No</b>   | Nil        |        |
|                                                                                                                                     | <b>Quote Date</b> | 16-10-2021 |        |
|                                                                                                                                     | <b>SupplyType</b> | Supply     |        |

**Kind Attn : Mr. Vishal**

Purchase Order for the Supply of following Items.

| Item Name                                                           | Qty  | Rate   | Dis% | GST   | Amount        |
|---------------------------------------------------------------------|------|--------|------|-------|---------------|
| 1 3523 - Computers and Peripherals - Toner refill - NA - nos<br>12A | 1.00 | 230.00 | 0.00 | 18.00 | 271.40        |
| <b>Total Order Value . . .</b>                                      |      |        |      |       | <b>271.40</b> |
| Rupees : Two Hundred Seventy One and Paise Fourty Only.             |      |        |      |       |               |

### Terms and Conditions :-

|                              |                                                                                                                     |
|------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>Specification / Brand</b> | As per details given in the quotation                                                                               |
| <b>Payment Terms</b>         | After Delivery & Production of bill                                                                                 |
| <b>Tax</b>                   | All taxes included in above price.                                                                                  |
| <b>Delivery Date</b>         | Same Day                                                                                                            |
| <b>Delivery Location</b>     | Head Office<br>5-4-187/3 & 4, II nd Floor, M.G.Road, Secunderabad - 500003<br>Phone. 040-66335551                   |
| <b>Penalty For Delay</b>     | Nil                                                                                                                 |
| <b>Transportation Cost</b>   | Included in the above price.                                                                                        |
| <b>Warranty</b>              | Nil                                                                                                                 |
| <b>Advance Paid</b>          | Nil                                                                                                                 |
| <b>Other Terms</b>           | We reserve the right items not conforming to quality and specifications. Above order for Site office laptop urpose. |
| <b>Completion Date</b>       | Nil                                                                                                                 |
| <b>Measurment</b>            | Nil                                                                                                                 |
| <b>Security</b>              | Nil                                                                                                                 |
| <b>Remarks</b>               |                                                                                                                     |

For **Mehta & Modi Kowkur LLP**

Authorised Signatory

Accepted the above Terms And Conditions

For **Vivid World**

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

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

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

Contact

# Requisition Form

1345

| Company Name:                           |                    | Mehta & Modi Kowkooor |          | Date:        |           | 16-10-21 |       |
|-----------------------------------------|--------------------|-----------------------|----------|--------------|-----------|----------|-------|
| Site & Phase :                          |                    | Head Office           |          | Time:        |           |          |       |
| Supplier                                |                    |                       |          | Req. No.     |           | 183236   |       |
| Material required before date:          |                    |                       |          |              | ID No.    |          | 70417 |
| No                                      | Description        | Size                  | Quantity | Units        | Inward No | Date     |       |
| 1                                       | 12A Toner refiling |                       | 1        | No           |           |          |       |
| 2                                       |                    |                       |          |              |           |          |       |
| 3                                       |                    |                       |          |              |           |          |       |
| 4                                       |                    |                       |          |              |           |          |       |
| 5                                       |                    |                       |          |              |           |          |       |
| 6                                       |                    |                       |          |              |           |          |       |
| 7                                       |                    |                       |          |              |           |          |       |
| 8                                       |                    |                       |          |              |           |          |       |
| 9                                       |                    |                       |          |              |           |          |       |
| 10                                      |                    |                       |          |              |           |          |       |
| Remarks: This is for site Office laptop |                    |                       |          |              |           |          |       |
| Prepared By                             |                    | K.Suneel              |          | Approved by  |           |          |       |
| Sign.& Date                             |                    | 16-10-21              |          | Sign. & Date |           |          |       |

81926

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