

PURCHASE DIVISION
Advice for approval for credit to supplier

(M) (L)

Date: 27/11/2021		Prepared by: Sakiraj					
PO/WO no. 82746		PO / WO Date. 12/11/2021					
Supplier Name VIVID WORLD		PO/WO amount 389					
Firm/Company S S LLP		Project Site office					
Sl. No.	Bill No.	Bill Date	Bill amount				
1	2209	12/11/2021	389.4				
2	/	/	/				
3	/	/	/				
4	/	/	/				
Amount A - Bills total(Excluding Transport & Hamali Charges):			389				
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:			389				
Amount E - PO / WO value:			389				
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 type="checkbox"/> No (explained below)					
Excess / short material received		<input type="checkbox"/> Approved - within acceptable limits <input type="checkbox"/> No (explained below)					
Close PO / W7O		<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		29/11/21					
Remarks: fuel bill							
Approved by	Purchase Officer	Purchase Manager	Procurement Manager	MD	Accounts - receiver of bill	Accountant	Accounts Manager
Sign:	<i>[Signature]</i>						
Date	27/11/21						

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/-

Purchase Order

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19-11-2021 14:31:56

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82746

12.11.21 5:08:07

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

Supplier Details		Doc No	82746	183276
Vivid World		Doc Date	12-11-2021	
204, Kubera Towers, Narayanaguda, Hyderabad.		Quote No	Nil	
GSTIN 36AVTPS1528D1ZB		Quote Date	12-11-2021	
6682-3161/ 6682-3171	92462-15868	SupplyType	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 12A	1.00	230.00	0.00	18.00	271.40
2 3530 - Computers and Peripherals - Toner Magnet - Other - nos 12A Blade	1.00	100.00	0.00	18.00	118.00
Total Order Value . . .					389.40

Rupees : Three Hundred Eighty Nine and Paise Fourty Only.

Terms and Conditions :-

Specification / Brand	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	Summit Housing LLP Cherlapally, Behind Kingston PG college, Hyderabad Phone. 9618244433, Hamendra
Penalty For Delay	Nil
Transportation Cost	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 HO Purpose.
Completion Date	Nil
Measurement	Nil
Security	Nil
Remarks	

For **Summit Sales LLP**

Authorised Signatory

Name : _____

Contact : _____

Accepted the above Terms And Conditions

For **Vivid World**

Name : _____

Date : ___/___/___

Requisition Form

14266

Company Name:		Summit Sales		Date:		11-11-21	
Site & Phase :		Site office		Time:			
Supplier				Req. No.		183276	
Material required before date:			ID No.			71173	
No	Description	Size	Quantity	Units	Inward No	Date	
1	12A toner refilling		1	No			
2	82746						
3							
4							
5							
6							
7							
8							
9							
10							
Remarks: This is for Head Office							
Prepared By		K.Suneel		Approved by			
Sign.& Date		11-11-21		Sign. & Date			

APPROVED

24 NOV 2021

MINISH PARIKH
MANAGER PROCUREMENT

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

Requisition Form

Company Name:				Date:			
Site & Phase :				Time:			
Supplier				Req. No.			
Material required before date:			ID No.				
No	Description	Size	Quantity	Units	Inward No	Date	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Remarks:							
Prepared By				Approved by			
Sign.& Date				Sign. & Date			

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