PURCHASE DIVISION
Advice for approval for credit to supplier

Date			21,	2/21	1	Prepare	d by:	. :	- U	•			
PO/WO no.		1 / t - 3 /			1	PO / WO Date.			1/0 cha				
Supplier Name		F808			10	PO/WO	amount		22/	9/21			
Firm/Comp	anv	Floss	al so	29 1	Autro	4			24,015/-				
Sl. No.		Bill No.		ع ک	LLP	Project			Shiep				
		DIII NO.				Bill Date			Bill amount				
2		·	····	170	1_6	27/10/21			24,015%				
3			,					·					
4										/			
Amount A	- Bills t	otal(Exclud	ing Trans	port & Ha	mali Charg	es):			7 /				
Sl. No.	DC .No	9	DC. Date			MRN No.			DC matches MRN				
1.			****		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***************************************							
2,	····					99927							
3.							<u> </u>	· · · · · · · · · · · · · · · · · · ·	□ Yes □ No				
	Other (<u> </u>					DYes DNo				
Amount B			usportati	on charges						`			
Amount C-	-Other I	Debits:								-			
Amount D (D=A+B-C) - Amount to be credited to the supplier:									71				
Amount E -	PO/W	/O value:	***************************************	,	****				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	15/-			
Amount F -	Differe	ence (A – E)	: GST-18	3%					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	215/-			
Quantity rec	eived a	s per PO/W	70		Yes []	☐ Yes ☐ Excess received ☐ Short received ☐ Other (explained below)							
Is difference between PO / Bill acceptable?					□ Yes □ No (explained below)								
Excess / short material received					- Approv	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 -1								
Payment - c	· · · · · · · · · · · · · · · · · · ·			<u> </u>	1.								
Remarks:	····		<u> </u>	10/17	14	-							
·													
Approved	1 1	Purchase	Donal										
by by		Officer	Purch Mana		HAROS VII	Service Co	1D	Accounts – receiver of	Accountant	Accounts Manager			
Sign:		1		ח	חבר פר	21		bill					
Date	_	7			DEC 20		1						
NEADER 1 T				MIN	ISH PAR	KH	<u> </u>						

Notes: 1. In case amount to be credited to supplier and the following 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/-

	.OBAL SAFETY SOLUTIONS -5-48,冷anigunj,			nvoice No.			ted -Oct-21		
	cunderabad-500003	1	Delivery Note		Mode/Terms of Payment				
	TIN/UIN: 36AAOFG9573A1Z5								
>t≥ =_[ate Name:Telangana, Code:36 Mail:gss.infoteam@gmail.com		1	Buyer's Order No.			Dated		
	<u> </u>		80870-169024 Dispatch Doc No.		27-Oct-21 Delivery Note Date				
	yer (Bill to)			Dispatch Doc	: NO.	De	nvery N	ote Date	
VI.	mmit Sales LLP G Road, Secunderabad STIN/UIN : 36ACQFS2044C1Z7		1	Dispatched through			Destination		
Sta	ate Name : Telangana, Code : 36 ace of Supply : Telangana			Terms of Del	ivery				
SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount	
1	Barricade Tape Reflective Safety Jacket Orange	39199090 62071990	18 %	6 20 Rolls	l .			3,000.00 19,500.00	
			-					22,500.00	
	CGST@2.5% SGST@2.5% CGST@9% SGST@9%				2.50 2.50 9 9	% %		487.50 487.50 270.00 270.00	
1	INWARD nward No: (7/68) Dt: 27-/0-2/ MRN No: Dt: Received Ry: Sign:	NO ONE WAY	ARO COLLEGE	4 2 2					
	SUMMIT SALES LLP	110 1 214	(Sentenen salent	///					
L	Tota	1 1 20		59//				₹ 24,015.00	
,	mount Chargeable (in words)		<u>:H:</u>					E. & O.I	
	NR Twenty Four Thousand Fifteen Only HSN/SAC	\	xable	Centra	I Toy	- C+	ate Tax	Total	
1	HONONO		/alue	1		≀ate	Amoi		
	9199090 22071990	19		0 2.50%	270.00 487.50 2	9% 50%	48	70.00 540.0 37.50 975.0	
-		Total 22	,500.0	<u>ا0</u>	757.50		75	7.50 1,515.0	
1	fax Amount (in words): INR One Thousand Five I	Hundred F	ifteen	Only		IN	WAI	2 33	
					inward No:		280	Dt: 92.//2	
				į į m	MRN No: C	_3 /			
					Received R	v:	4-7-4	Dt: 1 12	
1.		•	-	1		J .	1	Sign:	
- 1	Company's PAN : AAOFG9573A		C	onida Da-ilia	SUN	1MI	TSAI	ES LLP	
	<u>Declaration</u> We declare that this invoice shows the actual price o	of the	Compa	any's Bank∜t Name :	etails AXIS BANI			OU LLE	
	goods described and that all particulars are true and		A/c No	o. :	919020070	1793			
-	Customer's Seal and Signature		Branch	& IFS Code:				ad & UTIB000006 AFETY SOLUTION	
i	U		İ		•				
							ETY	Authorised Signate	
						1/55	X(1)	\~\\\	

This is a Computer Generated Invoice

17168

22-09-2021 14:55:17

80870

18.09.21 11:28:02

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

 Doc No
 80870
 169024

 Doc Date
 22-09-2021

 Quote No
 Nil

GSTIN 36AAOFG9573A1Z5

9502555088/9581228898

Quote Date 22-09-2021
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 9591 - Tools - Safety Indication Ribbon - NA - nos	20.00	150.00	0.00	18.00	3,540.00
2 6164 - Miscellaneous - Safety Jacket - NA - Nos Orange	300.00	65.00	0.00	5.00	20,475.00
pees: Twenty Four Thousand Fifteen Only.				e	24,015.00

Terms and Conditions :-

Specification /

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

outline Housing CL:

Cherlapally, Behind Kingston PG college, Hyderabad

Phone. 9618244433, Hamendra

Penality For Delay 1

Transportation

Transportation Extra.

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 Nil

Measurment Security

Nil

Remarks

For	Summi	t Sales	LLP	~			
Auth	orised S	ignatory	_	1	1	ì	
Nan	ne :		\\ \	22	90	207	
					l		_

Accepted the above Terms And Conditions
For Global Safety Solutions

me : ______ Date : __/__/__

wh

Requisition Form Company Name: SUMMIT SALES LLP Date: 17-09-2021 Site & Phase: SUMMIT HOUSING LLP Time: 11:00PM Supplier Req. No. 169024 Material required before date: ID No. 69545 Inward No Date Description Size Quantity Units No Safety Indication Ribbon 20 Nos Safety Jackets-Orange 300 Nos Remarks: For Stock Replenishing Purpose Prepared By Bhavani APPROVED BY 17-09-2021 Sign.& Date Sign. & Date Note: On receipt of material at site write inward number and date in last 2 columns. 2 0 SEP 2021 SOHAM MODI MANAGING DIRECTOR