# PURCHASE DIVISION Advice for approval for credit to supplier

Date:		24/142	Prepar	He	ha			
PO/WO no.		97	592 PO/W	O Date.	14	1) My		
Supplier Na	me	Am Re Ele	hicah PO/WO	PO/WO amount		8521=		
Firm/Compe	ny iny	SSLY	Project		SE	up		
Sl. No.	Bill No.		Bill Da	÷ a	Bill amount	The second secon		
1		1168		Marky	42	8 621-		
2		1100		77.1	101			
3					and the state of t			
4								
Amount A -	Bills total(Exclud	ing Transport & He	unali Charges):		42	8521-		
Sl. No.	DC .No	DC. Da	te	MRN No.	DC matches	MRN		
Since and a second	***************************************				O Yes O No	)		
2.					□ Yes □ No	>		
3.					□ Yes □ No			
Amount B-0	Other Credits : Tra	reportation charge	5	all and a second a		the through the second section (1984)		
Amount C-(	Other Debits:			HERBERT LINE OF THE STATE OF TH				
Amount D (L	)=A+B-C) - Amo	ant to be credited to	the supplier:		47	2124		
Amount E - I	PO/WO value:				47.	8521-		
Amount F - I	Difference (A - E)	: GST-18%						
Quantity rece	ived as per PO /W	0	O Yes o Excess re	ceived a Short receive	ed Other (expla	ined below)		
Is difference l	between PO / Bill	acceptable?	a Yes a No (expla	ined below)	<del></del>			
Excess / short	material received	2	□ Approved - within acceptable limits □ No (explained below)					
Close PO/W	70		Yes no No - wait for balance material no (explained below)					
Advance paid / PDC given (deduct when paying)								
Payment - du	e-date	***************************************	31/1/4					
Remarks:		***************************************	1					
And Committee and Committee of the Commi	medican statistical continua settembrid y actinopolica na necessaria de action		N					
Approved by	Purchase Officer	Purchase P	Poche dent Managel	D Accounts - receiver of bill	Accountant	Accounts Manager		
Sign:	X	3	DEC 2021	- OIII	1:			
Date		MIN	ISH PARIKH					

Notes: I. In case amount to be credited to applied and the inits that does not match prepare IV 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 1,60,000/- 14. Attach IV, 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/-

### TAX INVOICE

Dated Invoice No Sri Ambe Electricals 5-2-32 to 34/b, Plot No.97 1168 17-Dec-2021 Sri Sai's Oxford Terrace, **Delivery Note** Mode/Terms of Payment R.P Road, Opp Gujarati High School, Secunderabad. GSTIN/UIN: 36AAZPL0425H1ZH Supplier's Ref. Other Reference(s) State Name : Telangana, Code : 36 E-Mail : sriambeelectricals@gmail.com Buyer's Order No. Dated Consignee SUMMIT SALES LLP 14-Dec-2021 83597/169248 5-4-187/3&4,II ND FLOOR Despatch Document No. Delivery Note Date M G ROAD, SECUNDERABAD : 36ACQFS2044C1Z7 GSTIN/UIN Despatched through Destination State Name : Telangana, Code : 36 Terms of Delivery

Buyer (if other than consignee)

SUMMIT SALES LLP

5-4-187/3&4,II ND FLOOR M G ROAD, SECUNDERABAD

GSTIN/UIN

: 36ACQFS2044C1Z7

State Name

Telangana, Code: 36

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Disc. %	Amount
1	R-TPN04 WAY MD DB R-TPN06 WAY MD DB	85371000 85371000	20 nos 10 nos	1,290.00 1,560.00		1	25,800.00 15,600.00
	CGS7 SGS7	1					41,400.00 3,726.00 3,726.00
	Tota	1	30 nos				Rs. 48,852.00

Amount Chargeable (in words)

E. & O.E

## INR Forty Eight Thousand Eight Hundred Fifty Two Only

HSN/SAC	Taxable	Central Tax		State Tax		Total	
	Value	Rate	Amount	Rate	Amount	Tax Amount	
85371000	41,400.00	9%	3,726.00	9%	3,726.00	7,452.00	
Total	41,400.00		3,726.00		3,726.00	7,452.00	

Tax Amount (in words) : INR Seven Thousand Four Hundred Fifty Two Only

Company's Bank Details

Bank Name

: Yes Bank Ltd

A/c No.

: 009786900000484

Branch & IFS Code: BEGUMPET & YESB0000097

for Sri Ambe Electricals

Declaration

(1) Goods once sold will be not returned.

(2) Subjict to Secunderebad jurisdiction

Authorised Signatory

This is a Computer Generated Invoice

## **Purchase Order**

Page(s)	1	Of	1	
rage(3)	•	01	۰	

16-12-2021 3:08:02 PM

From Company: Summit Sales LLP

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

G S T No.: 36ACQFS2044C1Z7

83597

09.12.21 3:17:43

Supplier Details				
Sri Ambe Electricals		Doc No	83597	169248
Plot no-97,Sri Sai Oxford Terrace R.P.Road,Secunderabad-500003		Doc Date	14-12-20	21
		<b>Quote No</b>	NIL	
GSTIN 36		<b>Quote Date</b>	09-12-20	21
7702963535	7702963535	SupplyType	Supply	

#### Kind Attn: Hari Prasad/ Subba Reddy

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 4547 - Electrical - other - Distribution Board - 3 Phase - nos 4 Way	20.00	1,290.00	0.00	18.00	30,444.00
2 4547 - Electrical - other - Distribution Board - 3 Phase - nos 6 Way	10.00	1,560.00	0.00	18.00	18,408.00
		Total O	der Value	e	48,852.00

Rupees: Fourty Eight Thousand Eight Hundred Fifty Two Only.

#### Terms and Conditions :-

Specification /

All items shall be of 'ABB' brand, Classiq series.

**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

Penality For Delay Nil

Transportation

Transport cost shall be borne by us.

Warranty

10 years warranty.

Advance Paid

Nil

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Payment as per actual receipt of material. Above order for replinishing stock purpose.

**Completion Date** 

Nil

Measurment Security Nil Nil

Remarks

Original invoice + Copy of proof of delivery is required to process invoice for payment. DO NOT send original invoice to site. Original invoice must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email

For Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions

For Sri Ambe Electricals

Name :

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

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

Requisition Form

Compa	any Name:	SUMMIT SALE	S LLP	Date:		09-12-2021	
Site &	Phase:	SUMMIT HOUS	SING LLP	Time:		11:00PM	
Suppli	er			Req. No.		169248	
Materi	ial required before date:			ID No.		72017	
S.No	Descrip	otion	Size	Quantity	Units	Inward No	Date
1	Surface Mounted Tube	Light	1'	40	Nos		
2	MCB		16amps	96	Nos		
3	МСВ	(98'	06amps	48	Nos		
4	Module Plate	93598	8way	95	Nos		
5	Module Plate		6way	240	Nos		
6	Switch		16amps	100	Nos		
7	Socket		16amps	100	Nos		
8	Fan Dimmer			72	Nos		
9	DB-3Phase	83597.	4way	20	Nos		
10	DB-3 Phase	033	6way	10	Nos	V	
Remarks: For Stock replenishing Purpose					APPROVE	BY	
Prepar	repared By Bhavani					14 050 0	004
Sign.&	77.0.000 300.000	09-12-2021		Sign. & Da	ate	1 1 DEC 2	DI
Note: On receipt of material at site write inward i			umber and date in last	2 columns.		MANAGING DIRE	

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

Page(s) 1 Of 1

16-12-2021 3:08:02 PM

Original / Office Copy / Purchase Div.Copy

From Company: Summit Sales LLP

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

G S T No.: 36ACQFS2044C1Z7

Supplier Details				
Sri Ambe Electricals		Doc No	83597	169248
Plot no-97,Sri Sai Oxford Terrace R.P.Road,Secunderabad-500003		Doc Date	14-12-2021	
		<b>Quote No</b>	NIL	
GSTIN 36		<b>Quote Date</b>	09-12-202	21
7702963535	7702963535	SupplyType	Supply	

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**Completion Date** 

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Measurment

Nil Nil

Security Remarks

Original invoice + Copy of proof of delivery is required to process invoice for payment. DO NOT send original invoice to site. Original invoice must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email

For Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions

For Sri Ambe Electricals

Name:	

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