PURCHASE DIVISION Advice for approval for credit to supplier

Date:		29/01/22	Prepare	ed by	Vanaje	rebi	Serial no.		-012080
Supplier na	me		h ld		· Vocajo g		HO inward	no.	
Firm/Comp	any	SSLLP	Project		Head to	Hice	HO receive	ed date	
PO/WO dat	е	19/01/22	PO/WC	No.	8491	7	Scan ID.		
Sl no.		Bill no.		Bill	date		Bill amount		Original attached
1.	6	256		19/01	122	1.0.	10.20	1	Yes 🗆 No
2.				1 (1		')	1		□ Yes □ No
3.			:		7				□ Yes □ No
4.						,			□ Yes □ No
Amount A	- Bills to	otal (Excluding Trans	sport & H	Iamali Char	ges):			10	50.20/-
Proof of del	ivery by	way of: v DCs/bill	□ Steel	report \square RM	C pour repor	rt 🗆 Sol	id block repo	ort d Ins	
MRN nos						Proof o	of delivery		□ Yes □ No
	Other C	Credits : Transportation	n charge	ne .		materie	SWICIV		
			ni charge					_	
Amount C -								_	
Amount D (D=A+B	-C) – Amount to be	credited t	to the supplie	er:			1.05	50-201-
Amount E -	PO / W	O value:		A CONTRACTOR OF THE PROPERTY O				10.5	50.201-
Amount F -	Differe	nce (A – E):						7	
Quantity rec	eived as	s per PO/WO		Yes o	Excess receiv	ved 🗆 Sh	ort received	□ Part r	eceived
Close PO / \	WO	5		Yes [No - wait for	r balance	material 🗆 (Other	17.0
Payment - d	lue date			1	02/22				
Remarks:			A'C	al B91					111111111111111111111111111111111111111
					<u> </u>				
Approve	d by	Purchase Officer		chase nager	MD		Account	ant	Accounts Manager
Name:		Vauajatshi	Ivia	nakei					ivianagei
Sign:		Dy	Water Street, or My Street, St						
Date		29/01/22							
Approval lin		Upto 20k	Above 2	20k	Above 100l	(Upto 20k		Above 20k

Notes: 1. In case amount to be credited to supplier and the bills total does not match, accountants to prepare JV for debit or credit.

2. This set should only have 5 documents i.e., advice to credit to supplier, original bill, proof of delivery, original purchase order with barcode, original requisition. 3. Do not attach additional documents like weighment slips, RMC batch reports, duplicate documents, Eway bills, test reports, etc. 4. In Amount A, exclude transport, Hamali charges, etc., and instead include in Amount B. 5. This report must reach HO within one working day of approval by purchase officer/purchase manager.

M/s. VIVID WORLD

A Complete Solution for all your cartridge needs

Flat No. 503, G2 Block, Indu Aranaya Pallavi Apts., Bandlaguda, Nagole, Hyderabad – 500 068, Telangana State. Tel: +91-9246215868

GSTIN: 36AVTPS1528D1ZB

TAX INVOICE

Invoice No.: 2256					Transpo	ort Mode :	£ 44-				
Invoice Date :19/01/2022					Vehicle	Number:	Ž.				
Reverse Charge (Y/N):					Date of	Supply:					
State : TELANGANA	Cod	Je	3	36							
Bill to Par	ty				77.7		S	Ship to Pa	arty		
Address: M/s. SUMMIT SALES LLP,					GATE P/	ASS NO: 66	626				
5-4-187/3&4, 2 ND FLOOR, SOHAM N	IANSION, I	MG F	RD, SI	ECBAD.	12	2					
GST: 36ACQFS2044C1Z7.					GSTIN:						
State : TELANGANA	348		Co de		State :			China na			Code
Product Description	HSN Code	U O M	Qty.	Rate	Amount	TAXABLE VALUE	CGST	Г	,	SGST	TOTAL
900							RATE	AMT	RATE	AMT	
HP 12A LASER TONER REFILLING	3707		01	230.00	230.00	41.40	9%	20.70	9%	20.70	271.40
HP 88A LASER TONER REFILLING	3707		02	230.00	460.00	82.80	9%	41.40	9%	41.40	542.80
HP 12 ALSER TONER MAGNET	8443	\top	01	100.00	100.00	18.00	9%	9.00	9%	9.00	118.00
HP 88A LASER TONER BLADE	8443	\top	01	100.00	100.00	18.00	9%	9.00	9%	9.00	118.00
		+									
		1		I	NWARI	0 4					
			'nw	ard No:	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, which i	19/12	12				
		100		J No:	D	: 0	100				
		1.000	· in	eived By	S. S	50	5				
		-	D	May or	PROPE	PTIES			-		-
		-	BON'A TO SERVE	MUUI	PROLE						
		-			-						
		1									
					890.00	160.20					1050.20
			/h	T-SA	la						890.00
RS. ONE THOUSAND FIFTY AND TWEN	NTY ONLY	1	15/	INJUARE	10/01	ADD :CGST	9%				80.10
(RS.1050.20)		100	en N	201	15 E	ADD: SGST					80.10
		1	1 4 5	ign:	/*//	Total Amoun					
			13	A TH	K.//	10ldi Amoun	(Allei Tax				1050.20
Bank Details					7	Cod	- 115-441				
Bank Name : INDIAN BANk	٫ ا	\sim	, -	1		Certi	fied that un	he particulars)	d correct
Branch : Narayanguda Branch	- (1	c/y	×>	1		1	For VIV	D WOK	LD	
Bank A/C : 406746378	_ (fly			1		7	18/	a	1011	
		٧						Authorize	ed Signa	atory	
Bank IFSC : IDIB000N015			1000	non Seal		1		11000	The same of the sa	A 77 1	

Purchase Order

Page(s) 1 Of 1

28-01-2022 10:56:39

From Company: Summit Sales LLP

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

G S T No.: 36ACQFS2044C1Z7

Supplier Details

Vivid World

204, Kubera Towers, Narayanaguda, Hyderabad.

Doc No

84917

183383

Doc Date

19-01-2022

Quote No

Nil

Quote Date

19-01-2022

GSTIN 36AVTPS1528D1ZB

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 HP12A	1.00	230.00	0.00	18.00	271.40
2 3523 - Computers and Peripherals - Toner refill - NA - nos HP 88A	2.00	230.00	0.00	18.00	542.80
3 3530 - Computers and Peripherals - Toner Magnet - Other - nos	1.00	100.00	0.00	18.00	118.00
4 3522 - Computers and Peripherals - Toner drum - NA - nos HP 88A tonner Blade	1.00	100.00	0.00	18.00	118.00
		Total Or	der Value	e	1,050.20

Rupees: One Thousand Fifty and Paise Twenty Only.

Terms and Conditions :-

Specification /

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

Head Office

5-4-187/3 & 4, II nd Floor, M.G.Road, Secunderabad - 500003

Phone. 040-66335551

Penality For Delay Nil

Transportation

Included in the above price.

Warranty

Nil

Advance Paid

Other Terms

We reserve the right items not conforming to quality and specifications. Above order for Site office 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 invoices must be sent to HO office or purchase site office. Proof of delivery /DC can be sent by email.

For Summit Sales LP

Authorised Signatory

Accepted the above Terms And Conditions

For Vivid World

Name:

Date : __/__/___

Requisition Form

Date:

19-01-2022

Summit Sales LLP

Company Name:

site & Phase:	но			Time:	-		
Supplier				Req. No.		183383	
Material required be	fore date:			ID No.		73 13 1	
No	Description		Size	Quantity	Units	Inward No	Date
1 12A Toner Re	filling			1	No		
2 88A Toner Re	filling	2.1		2	Nos		
3 12A Toner ma	ignet 80	1917		1	No		
4 88A Toner Bla	ade			1	No		
5							
6							
7							
8							
9			1				
10		V			1		
temarks: This is for	r site purpose			1	DORO	VED	
repared By	K.Su	neel		Approved by	Ari	2022	
ign.& Date	19-0	1-2022	Trans	Sign. & Date	201	AN TO	al act a transition are seen
					SCMANA	GEO	
			Requisit	tion Form	Sr. MANA	Gr. C.	
Company Name:			Requisit	tion Form Date:	Sr. Mana		
			Requisit	Date:	Sr. Maha	GE S	
ite & Phase : upplier			Requisit	Date: Time: Req. No.	Sr. MANA	GE-S-	
ite & Phase :	fore date:		Requisit	Date:	Sr. Mana		
upplier Material required be	fore date:		Requisit	Date: Time: Req. No.	Sr. Mana Units	Inward No	Date
Site & Phase : Supplier Material required be				Date: Time: Req. No. ID No.			Date
Supplier Material required be				Date: Time: Req. No. ID No.			Date
Site & Phase : Supplier Material required be				Date: Time: Req. No. ID No.			Date
Supplier Material required be				Date: Time: Req. No. ID No.			Date
2 3 4				Date: Time: Req. No. ID No.			Date
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