# PURCHASE DIVISION Advice for approval for credit to supplier



Date:		08/02/2022	Prepare	ed by	Ramya		Serial no.			2569
Supplier na	me	Sri Ambe	Flort	ricals			HO inward	l no.		
Firm/Comp	any	Vista Homes	T	ricus	vista H	A MOS	HO receive	ed date		
PO/WO dat	e	01.02.2022	PO/WC	No.	25058		Scan ID.			
SI no.		Bill no.		Bill			Bill amount		Original	attached
1.	141	14		05/02	12022	2,	006.0	00	Yes	□ No
2.							1		□ Yes	□ No
3.									□ Yes	□ No
4.									□ Yes	□ No
Amount A	- Bills to	otal (Excluding Trans	port & F	Iamali Charg	ges):			2,0	06.0	()
Proof of del	ivery by	way of: DCs/bill	□ Steel	report  RM	C pour repor	t 🗆 Sol	id block rep			
MRN							of delivery	-	Yes D	No
nos.:		103381				matche	s MRN			
Amount B -	Other (	Credits: Transportation	on charge	es					_	
Amount C -	Other I	Debits :							_	
Amount D (	D=A+B	3-C) – Amount to be	credited 1	to the supplie	er:			2.0	06-0	O
Amount E -	PO / W	O value:							06.0	
Amount F -	Differe	ence (A – E):			-11			, 0	_	
Quantity red	ceived a	s per PO /WO		D Yes n	Excess receiv	ved 🗆 Sh	ort received	□ Part r	eceived	
Close PO /	WO	7		□ Yes □	No – wait for	r balance	e material	Other		
Payment - c	lue date			14/02	12022	1				
Remarks:	444			final						
<del>in annual and art</del>				+11100	Ditt					
Approve	d by	Purchase Officer		rchase	MD		Accoun	itant	1	counts nager
Name:		Ranya								
Sign:		Ru								
Date		08/02/2022								
Approval lin		Upto 20k	Above	20k	Above 100	k	Upto 20k		Above 2	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.

# **TAX INVOICE**

Sri Ambe Electricals 5-2-32 to 34/b, Plot No.97	Invo	oice No.		Dat	ed	
	141	14		5-F	eb-2022	
Sri Sai's Oxford Terrace, R.P Road, Opp Gujarati High School, Secunderabad.	Del	ivery Note		Mod	de/Terms of	Payment
GSTIN/UIN: 36AAZPL0425H1ZH State Name : Telangana, Code : 36 E-Mail : sriambeelectricals@gmail.com	Sup	plier's Re	f.	Oth	er Referenc	e(s)
Consignee	Buy	er's Orde	r No.	Dat	ed	
VISTA HOMES	850	58/1809	18	1-F	eb-2022	
5-4-187/3 & 4, IInd Floor, M.G Road,			cument No.		ivery Note D	ate
Secunderabad - 500003						
GSTIN/UIN : 36AAGFV2068P1ZJ State Name : Telangana, Code : 36	Des	spatched t	hrough	Des	stination	
	Ter	ms of Del	ivery			
Buyer (if other than consignee)						
VISTA HOMES						
5-4-187/3 & 4, IInd Floor, M.G Road,						
Secunderabad - 500003			-			
GSTIN/UIN : 36AAGFV2068P1ZJ						
State Name : Telangana, Code : 36						
Description of Goods	HSN/SAC	Quantit	y Rate	per	Disc. %	Amount
1 SEN 2P DB ENCLOSURE	85371000	5 no	os 340.	00 nos		1,700.00
		-				
INWARD CGST	7		- 1		5 100	153.00
117	-1		-			153.00
II MPN No.	4		-			
		-	1200			
Received By Sign: /						
	AND THE PERSON NAMED IN COLUMN					
Wista Homes						
A STATE OF THE CO	E F					
Total		5 no	os		Rs	. 2,006.00
Amount Chargeable (in words)					1	E. & O.E
					te Tax	Total
INR Two Thousand Six Only	Taxable	Centr	al Tax	Sta		lotai
INR Two Thousand Six Only	Taxable Value	Centr	Amount	Rate	Amount	Tax Amount
INR Two Thousand Six Only						Tax Amount 306.00

This is a Computer Generated Invoice

## **Purchase Order**

			00	
Pag	le(s)	-	Of	1

01-02-2022 12:43:56 PM

From Company: **Vista Homes** 

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

G S T No.: 36AAGFV2068P1ZJ



31.01.22 4:50:16

Supplier Details					
Sri Ambe Electricals		Doc No	85058	180918	
Plot no-97,Sri Sai Oxfor	d Terrace R.P.Road,Secunderabad-500003	Doc Date	01-02-2022		
		Quote No	NIL		
GSTIN 36		<b>Quote Date</b>	25-01-202	22	
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 4618 - Electrical - other - Metal Encloser - other - nos ABB Change over box-25amps 2 pole mcb encloser	5.00	340.00	0.00	18.00	2,006.00
1		Total Or	der Value	e	2,006.00

#### 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** 

Vista Homes Sy. No. 193, Kapra, Hyd. From ECIL take left in lane opposite MRR school

Phone. Contact: Mr. Khader - 7893844733

Penality For Delay Nil

Transportation

Transport cost shall be borne by us.

Warranty

10 years warranty.

Advance Paid

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 E block part 2 flats fixing purpose.

Name:

**Completion Date** 

Measurment

Nil Nil

Security

Nil

Remarks

For Vista Homes Authorised Signator 2022 Name:

Accepted the above Terms And Conditions

For Sri Ambe Electricals

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

2 pole entloser

Requisition Form

	pany Name:	Vista Hon				ate:	-	14.01.2022	
Site	& Phase :	Vista Hon	nes		T	îme:	1	14:30	
Supp	lier:				Req. I	No.		180918	
Mate	rial required before date:		19.01.22		ID No	).		72974	
No	Descrip	otion		Siz	e	Quantity	Units	Inward No	Date
1	3 Phase DB Box			uwa	4.	05	No's		
2	ABB Change Over Box	25 Am	P5-		V	05	No's	85058	
3	MCB			16 an	nps	10	No's		
4	MCB Q	4654		6 am	ps	10	No's		
5	4 pole isolator			40 an	nps	05	No's		
6									
7									
8							1		
9									
10						T A	PARCO		
Rem	arks: For E block part 2 flat	s fixing purp	oose				OTFEB	2027	
Prepa	ared By	V.Sanketh	1		Appro	oved by	OTFED	- Alchi	
Sign.	& Date	14.01.22			Sign.	& Date	NINISH P	CHOCSENT	
Not	e: On receipt of material at	site write in	ward number	and date	in last ?	columns. MAN	VULL L	The state of the s	
1401	e. On receipt of material at	Site write in	ward number	and date	iii iast 2	Columns Potto			
1100	e. On receipt of material at	site write iii	ward indiliber						
	pany Name:	Vista Hon		Requisi	tion F				
Com			nes		tion Fe	orm			
Com	pany Name: & Phase :	Vista Hon	nes		tion Fe	orm Date:			
Com Site of	pany Name: & Phase :	Vista Hon	nes	Requisi	tion Fo	Orm Date: Time:			
Com Site of	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time:	Units	Inward No	Date
Site of Supp	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com Site of Supp Mate No	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Site of Supp	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com Site of Supp Mate No 1 2	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Site of Supp Mater No	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Site of Supplement No 1 2 3 4	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com Site of Supp Mate No 1 2 3 4 5	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com Site of Supp Mate No 1 2 3 4 5	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com Site of Supp Mate No 1 2 3 4 5 6 7	pany Name: & Phase : olier orial required before date:	Vista Hon	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com   Site   Supp   Mate   No   1   2   3   4   5   6   7   8   9	pany Name: & Phase : olier orial required before date:	Vista Hon Vista Hon - iption	nes	Requisi	Req. 1	Orm Date: Time: No.		Inward No	Date
Com Site of Supp Mate No 1 2 3 4 5 6 7 8 9 Rem	pany Name:  & Phase :  blier  rial required before date:  Descr	Vista Hon Vista Hon - iption	nes	Requisi	Req. 1 ID No	Orm Date: Time: No.		Inward No	Date

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