**Sales Person: Vikrant Aloni POT ID :** 28214

GOAPL OPF No. VA/004 OPF Date:07/04/2018

# 

Customer **Name**: Edelweiss Broking Limited Galaxy Billing from (Location) :Mumbai

# 

Purchase Order No: EBL/TECH/0040/2018 Purchase Date: 24/03/2018

|  |  |
| --- | --- |
| **Billing Address** | Delivery Address |
| Edelweiss Broking ltd, 1st Floor, Kohinoor City,  Kirol road, off LBS Road, Kurla, Mumbai - 400070 | Edelweiss Broking ltd, 1st Floor, Kohinoor City,  Kirol road, off LBS Road, Kurla, Mumbai - 400070 |
|  |  |
| State :Maharashtra | State :Maharashtra |
| Contact Person: Puneet Shadija | Contact Person: Puneet Shadija |
| Tel :- 02243428000 | Tel :- 02243428000 |
| Email:- | Email:- |
| GSTN NO: - 27AABCE9421H1ZO  PAN NO:- | GSTN NO: - 27AABCE9421H1ZO  PAN NO:- |
| Customer Declaration Applicable : Yes / No | |

**SALES DETAILS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. | Description | Qty  (In Months) | Unit Rate per  Month INR | Total Price  INR |
| 1 | Resource Name- Neha Ghogle  Duration- 1st April 2018 to 31st March 2019 | 12 | 67200 | 806400 |
|  |  |  |  |  |
|  |  |  | Sub- Total | 806400 |
|  |  |  | **CGST 9%** | 72576 |
|  |  |  | **SGST 9%** | 72576 |
|  |  |  | **IGST %** |  |
|  |  |  | **Freight** |  |
|  |  |  | **Grand Total** | 951552 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dely. Reqd. Dt.** | **L. D.** | **SPC**  **Required.** | **Prefered Vendor**  **Name** | **Estimated**  **Delivery Dt.** | **Mtrl. rcd. From**  **Vendor Dt.** | **Installation**  **Compl. Date** |
|  |  |  |  |  |  |  |

**SPECIAL INSTRUCTIONS:**

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**PAYMENT TERMS :** Monthly (Invoice to be presented by 1st of every month of every month for the services of the previous month)

**SCOPE OF WORK:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\*Required Cost sheet in excel format along with OPF.***

**Purchase Department Use Only**

##### Bill of Material

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr. | Item 1 | | Item 2 | | Item 3 | |
| Description & Part No. | Qty. | Description & Part No. | Qty. | Description & Part No. | Qty. |
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***\*If required attach additional sheet***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S/N. | Challan No. | Challan Date | Invoice No. | Invoice Date |
|  |  | / / |  | / / |
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|  |  | / / |  | / / |
|  |  |  |  |  |
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**Accounts Department Use Only**