**Sales Person: Vineet POT ID : POT 35494**

GOAPL OPF No. VG/M/217 OPF Date: 24/12/2018

# 

Customer **Name** : ICICI Bank Ltd Galaxy Billing from (Location) : Mumbai

Purchase Order No. 1700003592 Purchase Date: 21-12-2018

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Billing Address** | Delivery Address | | | | | | |
| ICICI Bnak ltd  0012 Jaipur C-99, 'Shreeji Towers' Subhash Marg, Near Ahimsa Circle Jaipur - 302001 | ICICI Bnak ltd  0012 Jaipur C-99, 'Shreeji Towers' Subhash Marg, Near Ahimsa Circle Jaipur - 302001 | | | | | | |
| State : Rajasthan | State : Rajasthan | | | | | | |
| Contact Person: Melwyn | Contact Person: Melwyn | | | | | | |
| Tel :- + 9429972979 | Tel :- + 9429972979 | | | | | | |
| Email:- [melwyn.menezes@icicibank.com](mailto:melwyn.menezes@icicibank.com) | Email:- [melwyn.menezes@icicibank.com](mailto:melwyn.menezes@icicibank.com) | | | | | | |
| GST No : 08AAACI1195H1ZM | GST No : 08AAACI1195H1ZM | | | | | | |
| Customer Declaration Applicable : Yes / No | |  |  |  |  |  |

**SALES DETAILS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. | Description | Qty. | Unit Price  INR | Total Price  INR |
| 1 | VMware PSO for DR Implementation | 1 | 15,32,000 | 15,32,000 |
|  |  |  | Sub- Total | 15,32,000 |
|  |  |  | **CGST 9 %** | 0 |
|  |  |  | **SGST 9 %`** | 0 |
|  |  |  | **IGST %** | 2,75,760 |
|  |  |  | **Freight** | 0 |
|  |  |  | **Grand Total** | 18,07,760 |

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

**SPECIAL INSTRUCTIONS:**

**PAYMENT TERMS :** 100% payment will be released on delivery of material, installation and upon submission of invoice by vendor

**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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**Accounts Department Use Only**