**Sales Person: Babita POT ID :** POT28178

GOAPL OPF No. SP/B/023 OPF Date: **07.04.2018**

Customer **Name** : ACC Limited Galaxy Billing from (Location) :Andheri

# 

Purchase Order No. Mail Confirmation Purchase Date: **06.04.2018**

|  |  |
| --- | --- |
| **Billing Address** | Delivery Address |
| ACC Limited | ACC Limited |
| Cement House, 121,Maharshi Karve Road, | Cement House, 121,Maharshi Karve Road, |
| Churchgate,Mumbai- 400 020. | Churchgate,Mumbai- 400 020. |
| State : Maharashtra | State : Maharashtra |
| Contact Person: Ms Amisha | Contact Person: Ms Amisha |
| Tel # 33024211 | Tel # 33024211 |
| Email# | Email# |
| GSTN NO: 27AAACG0569P1Z7  PAN NO:- AAACG0569P | GSTN NO: 27AAACG0569P1Z7  PAN NO:- AAACG0569P |
| Customer Declaration Applicable : Yes / No | |

**SALES DETAILS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. | Description | Qty. | Unit Price  INR | Total Price  INR |
| 1 | Lenovo ThinkPad 65W AC Adapter for Lenovo T460 / X250Laptop **Part No: 0A36264 HSN Code: 85043100** | 1 | 1,450.00 | 1,450.00 |
|  |  |  | Sub- Total | 1,450.00 |
|  |  |  | **CGST 9%** | 130.50 |
|  |  |  | **SGST 9%** | 130.50 |
|  |  |  | **IGST %** |  |
|  |  |  | **Freight** |  |
|  |  |  | **Grand Total** | 1,711.00 |

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| --- | --- | --- | --- | --- | --- | --- |
| **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 :** **30Days from the date of Invoice**

**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. | |
|  | Andheri →  **0A36264** | 1 | HSN → **8504 → 18%** |  |  |  | |
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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**