**Sales Person: Babita POT ID :** POT28185

GOAPL OPF No. SP/B/026 OPF Date: **07.04.2018**

Customer **Name** : Ambuja Cement Foundation Galaxy Billing from (Location) :Andheri

# 

Purchase Order No: Mail confirmation Purchase Date:  **07.04.2018**

|  |  |
| --- | --- |
| **Billing Address** | Delivery Address |
| Ambuja Cement Foundation | Ambuja Cement Foundation |
| 5th Floor, Elegant Business Park MIDC | 5th Floor, Elegant Business Park MIDC |
| Off Andheri Kurla Road Andheri - East | Off Andheri Kurla Road Andheri - East |
| Contact Person: Mr Bikesh Kumar Singh | Contact Person: Mr Bikesh Kumar Singh |
| Tel # 8652707703 | Tel # 8652707703 |
| Email# | Email# |
| GSTN NO:  PAN NO:- | GSTN NO:  PAN NO:- |
| Customer Declaration Applicable : Yes / No **Vendor Code: 918034027** | |

**SALES DETAILS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. | Description | Qty. | Unit Price  INR | Total Price  INR |
| 1 | ThinkPad Battery 70++ (9 cell)or L430/L420/T430 Laptop **Part No: 0A36303** | 1 | 4,500.00 | 4,500.00 |
|  |  |  | Sub- Total | 4,500.00 |
|  |  |  | **CGST 14%** | 630.00 |
|  |  |  | **SGST 14%** | 630.00 |
|  |  |  | **IGST %** |  |
|  |  |  | **Freight** |  |
|  |  |  | **Grand Total** | 5,760.00 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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 :** 30 **Days 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 → **0A36303** | 1 | HSN: 8528 → 28% |  |  |  | |
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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**