**Sales Person: Tasneem POT ID : POT27454**

GOAPL OPF No. TK-NW-0016 OPF Date: 22/03/2018

Customer Name : Aditya Birla Finance Limited Galaxy Billing from (Location) : Mumbai

# 

Purchase Order No. PO Pending (Mail Conf.) Purchase Date:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Billing Address** | Delivery Address | | | | | | | | | | | | | | | | |
| Aditya Birla Finance Limited | Aditya Birla Finance Limited | | | | | | | | | | | | | | | | |
| G-Corp Tech Park,  Information Technology Department,  5th Floor, Opp Hypercity Mall,  Kasarvadavali, Ghodbunder Road,  Thane (W), 400601 | C/o, Celestial Fincon Pvt. Ltd.  32, 4th Floor, Corporate avenue,  D Wing, Off Mahakali Caves Road,  Near Paper Box factory.  Andheri (East)  Mumbai 400093 | | | | | | | | | | | | | | | | |
| State : Maharashtra | State : Maharashtra | | | | | | | | | | | | | | | | |
| Contact Person: Aditya | Contact Person: Aditya | | | | | | | | | | | | | | | | |
| Tel :- 9322949842 | Tel :- 9322949842 | | | | | | | | | | | | | | | | |
| Email:- | Email:- | | | | | | | | | | | | | | | | |
| GSTN NO: -  PAN NO:- | GSTN NO:  PAN NO:- | | | | | | | | | | | | | | | | |
| Customer Declaration Applicable : Yes / No | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**SALES DETAILS:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sr. | Description | Qty. | Unit Price  INR | Total Price  INR |
|  | Supply, Install as per Quote enclosed. |  |  | 305000.00 |
|  |  |  | Sub- Total | 305000.00 |
|  |  |  | **CGST %** | EXTRA |
|  |  |  | **SGST %** | EXTRA |
|  |  |  | **IGST %** |  |
|  |  |  | **Freight** | INCL. |
|  |  |  | **Grand Total** | 305000.00 |

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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: 1 – 2 Weeks from the date of receipt of PO

Warranty: NA

PAYMENT TERMS : **100% payment within 30 days of Invoice submission post completion of work.**

SCOPE OF WORK: as per annexure.

***\*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**