

SOP-VNDRINVC

Function-This menu is used to make payment of a vendor

A-Add Record

1-Invoke the menu VNDRINVC.

User: MA2767 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer | Menu | Show Memo Pad | Background Menu | CCY Converter

Finacle
Universal Banking Solution from Infosys | 30 August, 2024 | User: MA2767 | 04610 | Menu Shortcut: | Go

VENDOR INVOICE

Function Code *	-SELECT-	Vendor ID *	
Payment Type		Invoice Number	
Payment Voucher Number		Proforma Invoice Number	

Go Clear

2-Select valid function code from drop down.

User: PV2353 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer | Menu | Show Memo Pad | Background Menu | CCY Converter

Finacle
Universal Banking Solution from Infosys | 09 August, 2024 | User: PV2353 | 99999 | Menu Shortcut: | Go

VENDOR INVOICE

Function Code *	-SELECT- A-ADD M-MODIFY V-VERIFY I-INQUIRE D-DELETE	Vendor ID *	
Payment Type		Invoice Number	
Payment Voucher Number		Proforma Invoice Number	

Go Clear

3-Enter valid vendor id. **Example-Taking vendor of IFFCO-IFFC000067**

User: MA2767 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer | Menu | Show Memo Pad | Background Menu | CCY Converter

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VENDOR INVOICE

Function Code *	A-ADD	Vendor ID *	IFFC000067
Payment Type		Invoice Number	
Payment Voucher Number		Proforma Invoice Number	

Go Clear

User: MA2767	Calendar: Gregorian	Time Zone: IST	Solution: CoreServer
Function Code	A	Vendor Id	IFFC000067
Payment Type		Invoice Number	
Payment Voucher Number		Proforma Invoice Number	

Invoice Details	Goods / Services Details
-----------------	--------------------------

Details of entity - Madhya Pradesh Gramin Bank

Sol Id	04610
Pan	AAJAM1436G
Address	AIRPORT ROAD
Country Code	113
Reference Number *	NA

GSTIN

23AAJAM1436G12V

Vendor Id	IFFC000067
Address of Vendor *	
State Code of Vendor	
GSTIN of Vendor	
Invoice No.	
Payment Voucher No.	
Proforma Invoice No.	
Place of Supply	
Date of Supply	
Tax Invoice Value *	
Net Credit Amount	
Total Contract Value *	

List of Addresses

Addr No.	Address	State	State Code	Country Code	GSTIN	Type
1	1ST FLR COMMERCE HOUSE 7 RACE COURSE ROAD NEW PALASIA INDORE	Madhya Pradesh	23	113	23AAACI7573H12K	GSTIN
2	2ND FLOOR, AGRAWAL COMPLEX, NEAR GANESH MANDIR, BURHAR ROAD SHAHDOL	Madhya Pradesh	23	113	23AAACI7573H12K	GSTIN

Close

Submit
Validate
Cancel

User: MA2767		Calendar: Gregorian	Time Zone: IST	Solution: CoreServer
Function Code		Vendor Id		
Payment Type		Invoice Number		
Payment Voucher Number		Proforma Invoice Number		

Invoice Details	Goods / Services Details
-----------------	--------------------------

Details of entity - Madhya Pradesh Gramin Bank

Sol Id Pan Address Country Code Reference Number *	GSTIN Name State Code Department Name *
<input type="text" value="04610"/> <input type="text" value="AAJAM1436G"/> <input type="text" value="AIRPORT ROAD"/> <input type="text" value="113"/> <input type="text" value="NA"/>	<input type="text" value="23AAJAM1436G1ZV"/> <input type="text" value="AIRPORT ROAD"/> <input type="text" value="23"/> <input type="text" value="NA"/>

Details of Vendor

Vendor Id Address of Vendor * State Code of Vendor GSTIN of Vendor Invoice No. Payment Voucher No. Proforma Invoice No. Place of Supply Date of Supply Tax Invoice Value * Net Credit Amount Total Contract Value *	Vendor Name State of Vendor Country Code Payment Type Date of Invoice Payment Voucher Date Proforma Invoice Date Place of Supply Code Credit account No. * Credit account Name Tran Remarks * PSU
<input type="text" value="IFFCO000067"/> <input type="text" value="1ST FLR COMMERCE HOUSE 7 RACE"/> <input type="text" value="23"/> <input type="text" value="23AAACI7573H1ZK"/> <input type="text" value="12"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text" value="IFFCO TOKIO GENERAL INSURANCE"/> <input type="text" value="MADHYA PRADESH"/> <input type="text" value="113"/> <input type="text" value="REGULAR"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

User: MA2767	Calendar: Gregorian	Time Zone: IST	Solution: CoreServer	
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Invoice Details	Goods / Services Details
-----------------	--------------------------

Details of entity - Madhya Pradesh Gramin Bank

Sol Id 04610

Pan AAJAM1436G

Address AIRPORT ROAD

Country Code 113

Reference Number * NA

GSTIN 23AAJAM1436G1ZV

Name AIRPORT ROAD

State Code 23

Department Name * NA

Details of Vendor

Vendor Id JFFC000067

Address of Vendor * 1ST FLR COMMERCE HOUSE 7 RACE

State Code of Vendor 23

GSTIN of Vendor 23AAACI7573H1ZK

Invoice No. 12

Payment Voucher No.

Proforma Invoice No.

Place of Supply MADHYA PRADESH

Date of Supply 30-08-2024

Tax Invoice Value *

Net Credit Amount

Total Contract Value *

Vendor Name IFFCO TOKIO GENERAL INSUR

State of Vendor MADHYA PRADESH

Country Code 113

Payment Type REGULAR

Date of Invoice

Payment Voucher Date

Proforma Invoice Date

Place of Supply Code 23

Credit account No. *

Credit account Name

Tran Remarks *

PSU NO

[Help ?](#)

Submit
Validate
Cancel

7-Select place of supply from searcher

User: MA2767 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer

Invoice Details		Goods / Services Details	
Details of entity - Madhya Pradesh Gramin Bank			
Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name	NA
Reference Number	NA		
Details of Vendor			
Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply	MADHYA PRADESH	Place of Supply Code	23
Date of Supply	30-08-2024	Credit account No.	
Tax Invoice Value		Credit account Name	
Net Credit Amount		Tran Remarks	
Total Contract Value		PSU	NO

Submit Validate Cancel

8-Select date of supply from searcher

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VENDOR INVOICE

Function Code: A | Vendor Id: IFFC000067

Payment Type: | Invoice Number: |

Payment Voucher Number: | Proforma Invoice Number: |

Invoice Details		Goods / Services Details	
Details of entity - Madhya Pradesh Gramin Bank			
Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name	NA
Reference Number	NA		
Details of Vendor			
Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply		Place of Supply Code	
Date of Supply	30-08-2024	Credit account No.	

9-Enter valid credit account number

Invoice Details		Goods / Services Details	
Details of entity - Madhya Pradesh Gramin Bank			
Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name	NA
Reference Number	NA		
Details of Vendor			
Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	30-08-2024
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply		Place of Supply Code	
Date of Supply	30-08-2024	Credit account No.	04610SUNCR099
Tax Invoice Value		Credit account Name	MISC ITEMS
Net Credit Amount		Tran Remarks	
Total Contract Value		PSU	NO

Submit Validate Cancel

10-Enter tax invoice value

User: MA2767 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Invoice Details Goods / Services Details

Details of entity - Madhya Pradesh Gramin Bank

Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name	NA
Reference Number	NA		

Details of Vendor

Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	30-08-2024
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply		Place of Supply Code	
Date of Supply	30-08-2024	Credit account No.	04610SUNCR099
Tax Invoice Value	1,000.00	Credit account Name	MISC ITEMS
Net Credit Amount		Tran Remarks	
Total Contract Value		PSU	NO

Submit Validate Cancel

11-Enter transaction remarks

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Invoice Details Goods / Services Details

Details of entity - Madhya Pradesh Gramin Bank

Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name	NA
Reference Number	NA		

Details of Vendor

Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	30-08-2024
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply		Place of Supply Code	
Date of Supply	30-08-2024	Credit account No.	04610SUNCR099
Tax Invoice Value	1,000.00	Credit account Name	MISC ITEMS
Net Credit Amount		Tran Remarks	IFFCO INSURANCE PREMIUM
Total Contract Value		PSU	NO

Submit Validate Cancel

12-Enter total contract value

User: MA2767 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Invoice Details Goods / Services Details

Details of entity - Madhya Pradesh Gramin Bank

Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name	NA
Reference Number	NA		

Details of Vendor

Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	30-08-2024
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply		Place of Supply Code	
Date of Supply	30-08-2024	Credit account No.	04610SUNCR099
Tax Invoice Value	1,180.00	Credit account Name	MISC ITEMS
Net Credit Amount		Tran Remarks	IFFCO INSURANCE PREMIUM
Total Contract Value	1,180.00	PSU	NO

Submit Validate Cancel

13- Click on Goods and services detail tab, Enter Nature of service/goods field

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VENDOR INVOICE

Function Code: A | Vendor Id: IFFC000067
Payment Type: | Invoice Number: 12
Payment Voucher Number: | Proforma Invoice Number: |

Invoice Details | Goods / Services Details

Record 1 of 1

Add			
Record No.	1	Delete Record?	<input type="checkbox"/>
Nature of Service/Goods	IFFCO INSURANCE PREMIUM	SAC/HSN Code 1	
Nature of Supply	--SELECT--	Types of Goods	--SELECT--
Debit account No.		Debit account Name	
No. of Units/Goods		Rate per Unit	
Freight		Packing and Forwarding Charges	
Insurance		Discount	
Total Value		Subject to Reverse Charge	--SELECT--
Taxable Value		RCM Value	
Amount of Reverse Charge	0	Amount of CGST	
Rate of CGST		Amount of SGST/UGST	
Rate of SGST/UGST		Amount of IGST	
Rate of IGST		Credit Identifier	T4
Other Charges			
Input Credit Available	YES		

14-Select nature of supply from dropdown

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VENDOR INVOICE

Function Code: A | Vendor Id: IFFC000067
Payment Type: | Invoice Number: 1
Payment Voucher Number: | Proforma Invoice Number: |

Invoice Details | Goods / Services Details

Record 1 of 1

Add			
Record No.	1	Delete Record?	<input type="checkbox"/>
Nature of Service/Goods	IFFCO INS PREMIUM PAY	SAC/HSN Code 1	
Nature of Supply	SERVICE	Types of Goods	--SELECT--
Debit account No.		Debit account Name	
No. of Units/Goods		Rate per Unit	
Freight		Packing and Forwarding Charges	
Insurance		Discount	
Total Value		Subject to Reverse Charge	--SELECT--
Taxable Value		RCM Value	
Amount of Reverse Charge	0	Amount of CGST	
Rate of CGST		Amount of SGST/UGST	
Rate of SGST/UGST		Amount of IGST	
Rate of IGST		Credit Identifier	T4
Other Charges			
Input Credit Available	YES		
TDS Section	NO TDS	Certificate Number	
Certificate From Date		Certificate To Date	

15-Enter valid debit account number

User: MA2767 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer

Finacle | Universal Banking Solution from Infosys | 30 August, 2024 | User: MA2767 | 04610 | Menu Shortcut: | Go

VENDOR INVOICE

Function Code: A | Vendor Id: IFFC000067
Payment Type: | Invoice Number: 1
Payment Voucher Number: | Proforma Invoice Number: |

Invoice Details | Goods / Services Details

Record 1 of 1

Add			
Record No.	1	Delete Record?	<input type="checkbox"/>
Nature of Service/Goods	IFFCO INSURANCE PREMIUM	SAC/HSN Code 1	
Nature of Supply	SERVICE	Types of Goods	--SELECT--
Debit account No.	04610PLOE003	Debit account Name	INSURANCE
No. of Units/Goods		Rate per Unit	
Freight		Packing and Forwarding Charges	
Insurance		Discount	
Total Value		Subject to Reverse Charge	--SELECT--
Taxable Value		RCM Value	
Amount of Reverse Charge	0	Amount of CGST	
Rate of CGST		Amount of SGST/UGST	
Rate of SGST/UGST		Amount of IGST	
Rate of IGST		Credit Identifier	T4
Other Charges			
Input Credit Available	YES		
TDS Section	NO TDS	Certificate Number	
Certificate From Date		Certificate To Date	
TDS amount		TDS account No.	
TDS already deducted on provision		TDS on GST @ 2%	

Submit | Validate | Cancel

16-Enter valid amount in total value field

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User: MA2767

Calendar: Gregorian

Time Zone: IST

Solution: CoreServer

Invoice Details		Goods / Services Details	
<div>Record No. 1</div>			
Nature of Service/Goods		Delete Record?	
Nature of Supply		SAC/HSN Code 1	
Debit account No.		Types of Goods	
No. of Units/Goods		Debit account Name	
Freight		Rate per Unit	
Insurance		Packing and Forwarding Charges	
Total Value		Discount	
Taxable Value		Subject to Reverse Charge	
Amount of Reverse Charge		RCM Value	
Rate of CGST		Amount of CGST	
Rate of SGST/UGST		Amount of SGST/UGST	
Rate of IGST		Amount of IGST	
Other Charges		Credit Identifier	
Input Credit Available		Certificate Number	
TDS Section		Certificate To Date	
Certificate From Date		TDS account No.	
TDS amount		TDS on GST @ 2%	
TDS already deducted on provision			

17-Enter valid amount in Taxable value field

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User: MA2767

Calendar: Gregorian

Time Zone: IST

Solution: CoreServer

Invoice Details		Goods / Services Details	
<div>Record No. 1</div>			
Nature of Service/Goods		Delete Record?	
Nature of Supply		SAC/HSN Code 1	
Debit account No.		Types of Goods	
No. of Units/Goods		Debit account Name	
Freight		Rate per Unit	
Insurance		Packing and Forwarding Charges	
Total Value		Discount	
Taxable Value		Subject to Reverse Charge	
Amount of Reverse Charge		RCM Value	
Rate of CGST		Amount of CGST	
Rate of SGST/UGST		Amount of SGST/UGST	
Rate of IGST		Amount of IGST	
Other Charges		Credit Identifier	
Input Credit Available		Certificate Number	
TDS Section		Certificate To Date	
Certificate From Date		TDS account No.	
TDS amount		TDS on GST @ 2%	
TDS already deducted on provision			

18-Select subject to reverse charge from drop down

User: MA2767 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Invoice Details Goods / Services Details

Add Record 1 of 1

Record No.	1	Delete Record?	<input type="checkbox"/>
Nature of Service/Goods *	IFFCO INSURANCE PREMIUM	SAC/HSN Code 1	
Nature of Supply *	SERVICE	Types of Goods	--SELECT--
Debit account No. *	04610PLOE003	Debit account Name	INSURANCE
No. of Units/Goods *		Rate per Unit *	
Freight		Packing and Forwarding Charges	
Insurance		Discount	
Total Value *	1000	Subject to Reverse Charge *	--SELECT--
Taxable Value *	1000	RCM Value	YES
Amount of Reverse Charge	0	Amount of CGST	NO
Rate of CGST		Amount of SGST/UGST	
Rate of SGST/UGST		Amount of IGST	
Rate of IGST		Credit Identifier *	T4
Other Charges		Certificate Number	
Input Credit Available *	YES	Certificate To Date	
TDS Section *	NO TDS	TDS account No.	
Certificate From Date		TDS on GST @ 2%	0
TDS amount			
TDS already deducted on provision			

Submit Validate Cancel

19-Enter valid value in rate of CGST field

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User: MA2767 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Function Code: A Payment Type: REGULAR Vendor Id: IFFCO000067 Invoice Number: 12 Proforma Invoice Number:

Invoice Details Goods / Services Details

Add Record 1 of 1

Record No.	1	Delete Record?	<input type="checkbox"/>
Nature of Service/Goods *	IFFCO TOKIO PREMIUM	SAC/HSN Code 1	
Nature of Supply *	SERVICE	Types of Goods	--SELECT--
Debit account No. *	04610PLOE003	Debit account Name	INSURANCE
No. of Units/Goods *		Rate per Unit *	
Freight		Packing and Forwarding Charges	
Insurance		Discount	
Total Value *	1000	Subject to Reverse Charge *	NO
Taxable Value *	1000	RCM Value	0
Amount of Reverse Charge	0	Amount of CGST	90
Rate of CGST	9	Amount of SGST/UGST	
Rate of SGST/UGST		Amount of IGST	
Rate of IGST		Credit Identifier *	T4
Other Charges		Certificate Number	
Input Credit Available *	YES	Certificate To Date	
TDS Section *	NO TDS	TDS account No.	
Certificate From Date		TDS on GST @ 2%	0
TDS amount			
TDS already deducted on provision			

20-Enter valid value in rate of SGST/UGST field

User: MA2767 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Function Code: A Payment Type: REGULAR Vendor Id: IFFCO000067 Invoice Number: 12 Proforma Invoice Number:

Invoice Details Goods / Services Details

Add Record 1 of 1

Record No.	1	Delete Record?	<input type="checkbox"/>
Nature of Service/Goods *	IFFCO TOKIO PREMIUM	SAC/HSN Code 1	
Nature of Supply *	SERVICE	Types of Goods	--SELECT--
Debit account No. *	04610PLOE003	Debit account Name	INSURANCE
No. of Units/Goods *		Rate per Unit *	
Freight		Packing and Forwarding Charges	
Insurance		Discount	
Total Value *	1000	Subject to Reverse Charge *	NO
Taxable Value *	1000	RCM Value	0
Amount of Reverse Charge	0	Amount of CGST	90
Rate of CGST	9	Amount of SGST/UGST	90
Rate of SGST/UGST	9	Amount of IGST	
Rate of IGST		Credit Identifier *	T4
Other Charges		Certificate Number	
Input Credit Available *	YES	Certificate To Date	
TDS Section *	NO TDS	TDS account No.	
Certificate From Date		TDS on GST @ 2%	0
TDS amount			
TDS already deducted on provision			

21-Select input credit available from drop down list

User: PV2353 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Function Code: A Vendor Id: IFFC000067
Payment Type: Invoice Number: 1
Payment Voucher Number: Proforma Invoice Number:

Invoice Details Goods / Services Details

Record 1 of 1

Add

Record No. 1

Nature of Service/Goods INS

Nature of Supply SERVICE

Debit account No. 99999FLOE003

No. of Units/Goods

Freight

Insurance

Total Value 1000

Taxable Value 1000

Amount of Reverse Charge 0

Rate of CGST 9

Rate of SGST/UGST 9

Rate of IGST

Other Charges

Input Credit Available YES

TDS Section NO

Certificate From Date

TDS amount

TDS already deducted on provision

Delete Record? ☐

SAC/HSN Code 1

Types of Goods --SELECT--

Debit account Name INSURANCE

Rate per Unit

Packing and Forwarding Charges

Discount

Subject to Reverse Charge NO

RCM Value 0

Amount of CGST 90

Amount of SGST/UGST 90

Amount of IGST

Credit Identifier T4

Certificate Number

Certificate To Date

TDS account No.

TDS on GST @ 2% 0

Submit Validate Cancel

22-Select TDS section field from drop down list. Note-Select TDS section as per Invoice

User: PV2353 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Function Code: A Vendor Id: IFFC000067
Payment Type: Invoice Number: 1
Payment Voucher Number: Proforma Invoice Number:

Invoice Details Goods / Services Details

Record 1 of 1

Add

Record No. 1

Nature of Service/Goods --SELECT--

Nature of Supply NO TDS

Debit account No. OTHERS

No. of Units/Goods

Freight

Insurance

Total Value

Taxable Value

Amount of Reverse Charge

Rate of CGST

Rate of SGST/UGST

Rate of IGST

Other Charges

Input Credit Available

TDS Section 194(1)- PAYMENTS MADE TO OPERATOR OF CALL CENTER

Certificate From Date

TDS amount

TDS already deducted on provision

Delete Record? ☐

SAC/HSN Code 1

Types of Goods

Debit account Name

Rate per Unit

Packing and Forwarding Charges

Discount

Subject to Reverse Charge

RCM Value

Amount of CGST

Amount of SGST/UGST

Amount of IGST

Credit Identifier

Certificate Number

Certificate To Date

TDS account No.

TDS on GST @ 2%

Submit Validate Cancel

User: DR1856 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Invoice Details Goods / Services Details

Record 1 of 1

Add

Record No. 1

Nature of Service/Goods INSURANCE PREMIUM

Nature of Supply SERVICE

Debit account No. 60120FLOE003

No. of Units/Goods

Freight

Insurance

Total Value 1000

Taxable Value 1000

Amount of Reverse Charge 0

Rate of CGST 9

Rate of SGST/UGST 9

Rate of IGST

Other Charges

Input Credit Available YES

TDS Section NO TDS

Certificate From Date

TDS amount

TDS already deducted on provision

Delete Record? ☐

SAC/HSN Code 1

Types of Goods --SELECT--

Debit account Name INSURANCE

Rate per Unit

Packing and Forwarding Charges

Discount

Subject to Reverse Charge NO

RCM Value 0

Amount of CGST 90

Amount of SGST/UGST 90

Amount of IGST

Credit Identifier T4

Certificate Number

Certificate To Date

TDS account No.

TDS on GST @ 2% 0

Submit Validate Cancel

23-Enter valid net credit amount

User: DR1856 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer

Invoice Details | Goods / Services Details

Details of entity - Madhya Pradesh Gramin Bank

Sol Id	60120	GSTIN	23AAJAM1436G12V
Pan	AAJAM1436G	Name	MANAWAR
Address	JAWAHAR MARG,MALVIYA CHOUPAT	State Code	23
Country Code	113	Department Name *	NA
Reference Number *	NA		

Details of Vendor

Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor *	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	2023-24/25	Date of Invoice	13-08-2024
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply	MADHYA PRADESH	Place of Supply Code	23
Date of Supply	13-08-2024	Credit account No. *	60120SUNCRO99
Tax Invoice Value *	1180.00	Credit account Name	MISC ITEMS
Net Credit Amount	1180.00	Tran Remarks *	INSURANCE PREMIUM PAYMENT
Total Contract Value *	10000.00	PSU	NO

Submit | Validate | Cancel

24-Click on submit button

User: DR1856 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer

Finacle

Universal Banking Solution from Infosys

13 August, 2024 | User: DR1856 | 60120 | Menu Shortcut: | Go

Record Inserted Successfully.

Ok

Verify record

->Invoke menu and select valid function code V-Verify

->Enter valid vendor id

User: DR1856 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer

Finacle

Universal Banking Solution from Infosys

30 August, 2024 | User: DR1856 | 04610 | Menu Shortcut: | Go

VENDOR INVOICE

Function Code *	V-VERIFY	Vendor ID *	IFFC000067
Payment Type		Invoice Number	
Payment Voucher Number		Proforma Invoice Number	

Go | Clear

->Select payment type from searcher

User: DR1856 | Calendar: Gregorian | Time Zone: IST | Solution: CoreServer

Finacle

Universal Banking Solution from Infosys

30 August, 2024 | User: DR1856 | 04610 | Menu Shortcut: | Go

VENDOR INVOICE

Function Code *	V-VERIFY	Vendor ID *	IFFC000067
Payment Type		Invoice	
Payment Voucher Number		Proforma	

Go | Clear

List of Invoices

Payment Type	Invoice Number	Payment Voucher Num	Proforma Invoice Num	Tran Id	Tran Date	Bmc ContNo
REGULAR	12					null

Close

User: DR1856 Calendar: Gregorian Time Zone: IST Solution: CoreServer

Finacle Menu Show Memo Pad Background Menu CCY Converter

Universal Banking Solution from Infosys 30 August, 2024 | User DR1856 | 04610 | Menu Shortcut: Go

VENDOR INVOICE

Function Code *	V-VERIFY	Vendor ID *	IFFC000067
Payment Type	REGULAR	Invoice Number	12
Payment Voucher Number		Proforma Invoice Number	

Go Clear

->Click on go button

User: DR1856 Calendar: Gregorian Time Zone: IST Solution: CoreServer

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Invoice Details Goods / Services Details

Details of entity - Madhya Pradesh Gramin Bank

Sol Id	04610	GSTIN	23AAJAM1436G1ZV
Pan	AAJAM1436G	Name	AIRPORT ROAD
Address	AIRPORT ROAD	State Code	23
Country Code	113	Department Name *	NA
Reference Number *	NA		

Details of Vendor

Vendor Id	IFFC000067	Vendor Name	IFFCO TOKIO GENERAL INSURANCE
Address of Vendor *	1ST FLR COMMERCE HOUSE 7 RACE	State of Vendor	MADHYA PRADESH
State Code of Vendor	23	Country Code	113
GSTIN of Vendor	23AAACI7573H1ZK	Payment Type	REGULAR
Invoice No.	12	Date of Invoice	30-08-2024
Payment Voucher No.		Payment Voucher Date	
Proforma Invoice No.		Proforma Invoice Date	
Place of Supply	MADHYA PRADESH	Place of Supply Code	23
Date of Supply	30-08-2024	Credit account No.	04610SUNCR099
Tax Invoice Value *	1180.00	Credit account Name	MISC ITEMS
Net Credit Amount	1180.00	Tran Remarks *	IFFCO INSURANCE PREMIUM
Total Contract Value *	1180.00	PSU	NO

Submit Validate Cancel

->Click on submit button

User: DR1856 Calendar: Gregorian Time Zone: IST Solution: CoreServer

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Record Verified. Transaction Id is S22379248

OK