

KRUPANIDHI EDUCATIONAL TRUST

No. 5 Sarjapur Main Road, Koramangala, Bangalore - 560 034.

4088

CHEQUE VOUCHER

Date: 01/08/18

Head of Account :	Amount	
	Rs.	Ps.
Name : <u>VANS SCIENTIFIC INFORMATION PVT</u>	164,500	-
Being <u>Paid Journal from Adv</u>		
<u>For Purchase of Software</u> Bill No. <u> </u> Date <u> </u>		
Cheque No. : <u>412953</u> / <u>100</u> Date <u> </u>		
Rupees : <u>one lakh sixty four thousand</u>	1	
<u>Two hundred only</u>	1,64,500	-

TOT
14507

President

Treasurer

Authorized Person

Receiver Name & Signature

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9/11/18

PRINCIPAL
Krupanidhi College of Pharmacy
Chikkabellandur, Carmelaram Post,
Varthur Hobli, Bangalore - 560 035

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Varthur Hobli, Bangalore - 560 035

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KRUPANIDHI GROUP OF INSTITUTIONS, BANGALORE

FORMS / FORMATS
(ISO 9001:2015)

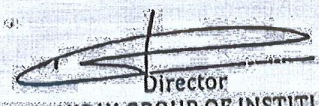
Doc. No: FAF/L4

Release No. 1.0
Date: 10/07/2017

Section: PP 11
Form No.: R/PP 11/02

Purchase Order



Vendor's Name: Vans Scientific Information Pvt Ltd Popular Prakashan, # 301, Mahalakshmi Chambers, 22, Bhulabhai Desai Road, Mumbai - 400 026		No. KPH-8	Date: 31.07.2018	
		Your Reference: Quotation Dt 30.06.2018		
		Indent No:		
Sub: Order for Purchase of Software - Micromedex Drug Information for Pharmacy Dept *****				
Referring to the above, we have pleasure in confirming our firm order with you for the following items subject to the conditions mentioned hereunder:				
No.	Description	HSN Code	Rate	Amount
1	Micromedex Clinical Knowledge Suite - Subscription 12 Months	998431	1,64,500	1,64,500
TOTAL COST				1,64,500
Note: Documents to be addressed to KGI, only.				
Excise: NA		Sales Tax: GST NA		Discount: NA
Delivery: Immediate		Freight: Included		Insurance: NA
Note : 1) Specification, Contents etc as per Your Quotation dt 30.06.2018				
2) Tax invoice should be "Krupanidhi College of Pharmacy"				
If the goods supplied do not conform to either or description and samples or defective or broken and damaged, the same shall be rejected and full amount with all connected expenses shall be paid back to us immediately. Order placed subject to Bangalore Jurisdiction. Please acknowledge and confirm.				


Director
KRUPANIDHI GROUP OF INSTITUTIONS

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IQAC
Krupanidhi College of Pharmacy
Bangalore-560 035


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Krupanidhi College of Pharmacy
Chikkabellandur, Carmelaram Post
Varthur Hobli, Bangalore - 560 035

Prepared by: Dr. Badrunisa. S Signature:  Designation: ISO Coordinator	Approved by: Dr. Samuel Paul Isaac Signature:  Designation: Director
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