	TFSCPL- Croc	DANKOTUWA PORCELAIN LTD			
Sr. No	Item	иом	Qty	Rate	Amount
1	HALF PLATE- 9"	Nos	250	197.55	49,387.50
2	TEA CUP	Nos	450	121.75	54,787.50
3	DESSERT PLATTER	Nos	24	828.15	19,875.60
4	SAMBAR BOWL	Nos	240	109.45	26,268.00
				Total	1,50,318.60
				GST 12%	18,038.23
		Total Amount	1,68,356.83		



DANKOTUWA PORCELAIN LTD

No. 47 & 49 (Old No. 15 & 16) Abdul Azeez Street, T.Nagar Chennai – 600 017 Tel no: 044 – 42033009/48056480 Mob no: +91 9884742308

HSN Code: 69111019 GST NO: 33AABCD8226B1Z7 Email: accounts@dankotuwachennai.com

Quote for M/s Travel Food Services, - 07.08.2024 - PR -00264

Sl.No.	Code No.	Description	Quai	ntity	Unit Price	Total Amount
		Dankotuwa Porcelain Tableware			INR	INR
		Design: White ware				
1	0315	HALF PLATE- 9"	250	PCS	197.55	49,387.50
2	4589	TEA CUP	450	PCS	121.75	54,787.50
3	6169	DESSERT PLATTER	24	PCS	828.15	19,875.60
4	3056	SAMBAR BOWL	240	PCS	109.45	26,268.00
			988	Nos		1,50,318.60
		Add: CGST @ 6%				9,019.12
		Add: SGST @ 6%				9,019.12
		Round Off				0.50
		TOTAL	988	Nos		1,68,357.33

NOTE: PAYMENT: 100% Advance along with Purchase Order

DELIVERY: Will be notified upon receipt of the confirmed order

VALIDITY: 10 Days from the date of this quote.

BANK

DETAILS: Name of Account: **Dankotuwa Porcelain Ltd**

Current A/c No. : **7580011812**Name of Bank : **Bank of Ceylon**

No.20/21 Casa Major Road N.No.2(O.No.11) Zerat Gardens 2nd Lane, Egmore, Chennai - 600008. RTGS/NEFT IFSC: **BCYOCHEN01**

SINGLE VENDOR DECLARATION						
Date: 22-08-2024	PO No: TFSCPL/PO/24-25/000474					
Vendor Name: DANKOTUWA PORCELAIN LTD						
Product Description: Crockery	Unit / Project Name: CHN TRAVEL CLUB LOUNGE - BUSINESS CLASS T2					
Justification:	Justification:					
Specifique Material procure by (As per Same material Procure by TFS Chennai	Only known supplier. (<u>List of the suppliers</u> which were contacted below and the specific reasons <u>why each was not a viable source</u>).					
	Only known qualified supplier or item. (List the qualifications that each source or items meet. If another supplier offers a similar item, provide the item identification, supplier information and comparable pricing).					
	Supplier proprietary item. (The selected supplier is the only manufacturer of this item. List the reasons why no substitute item can be used and if no similar item is available).					
	Franchise / Management / User Dept Directed. (Provide a copy of letter, or memo or e-mail specifically directing this source) vendor already work with us on same location.					
	Item / Rate Contracted. (Provide copy of the contract / agreement)					
Prepared By	Approved By					