

PURCHASE DIVISION  
Advice for approval for credit to supplier

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------|------------------|-------------|------------------|------------------|-----|------------|------------------|-------|--|--|--|--|--|-------|--|--|--|--|--|------|--|--|--|--|--|----------------|----------|-----------|------------|----------|-----------|
| Date: 12/05/2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                               | Prepared by: MINISH                                                                                                                                             |             | Serial no. 3935                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Supplier name: Sauthosh Paulin.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                               |                                                                                                                                                                 |             | HO inward no.                                                       |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Firm/Company: SCLP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               | Project: SCLP                                                                                                                                                   |             | HO received date                                                    |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| PO/WO date: 09/05/2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                               | PO/WO No. 88106                                                                                                                                                 |             | Scan ID.                                                            |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Sl no.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Bill no.                      | Bill date                                                                                                                                                       | Bill amount | Original attached                                                   |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 159.                          | 11/05/2022                                                                                                                                                      | 8,583/-     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| 2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                                                                                                                                                                 |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| 3.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                                                                                                                                                                 |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| 4.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               |                                                                                                                                                                 |             | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Amount A – Bills total (Excluding Transport & Hamali Charges):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                                                                                                                                                                 | 8,583/-     |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Proof of delivery by way of: <input type="checkbox"/> DCs/bill <input type="checkbox"/> Steel report <input type="checkbox"/> RMC pour report <input checked="" type="checkbox"/> Solid block report <input type="checkbox"/> Installation report                                                                                                                                                                                                                                                                                                                                              |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| MRN nos.: 10711                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Proof of delivery matches MRN |                                                                                                                                                                 |             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Amount B – Other Credits : Transportation charges                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Amount C – Other Debits :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                               |                                                                                                                                                                 |             | 8,583/-                                                             |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Amount E – PO / WO value:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                               |                                                                                                                                                                 |             | 8,583/-                                                             |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Amount F – Difference (A – E):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                               |                                                                                                                                                                 |             | NIL.                                                                |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Quantity received as per PO / WO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                               | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Part received |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Close PO / WO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                               | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> Other                                  |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Payment – due date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                               | 16/05/2022                                                                                                                                                      |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Remarks:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Approved by</td> <td>Purchase Officer</td> <td>Purchase Manager</td> <td>M D</td> <td>Accountant</td> <td>Accounts Manager</td> </tr> <tr> <td>Name:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sign:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Date</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Approval limit</td> <td>Upto 20k</td> <td>Above 20k</td> <td>Above 100k</td> <td>Upto 20k</td> <td>Above 20k</td> </tr> </table> |                               |                                                                                                                                                                 |             |                                                                     |                  | Approved by | Purchase Officer | Purchase Manager | M D | Accountant | Accounts Manager | Name: |  |  |  |  |  | Sign: |  |  |  |  |  | Date |  |  |  |  |  | Approval limit | Upto 20k | Above 20k | Above 100k | Upto 20k | Above 20k |
| Approved by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Purchase Officer              | Purchase Manager                                                                                                                                                | M D         | Accountant                                                          | Accounts Manager |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Sign:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                               |                                                                                                                                                                 |             |                                                                     |                  |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |
| Approval limit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Upto 20k                      | Above 20k                                                                                                                                                       | Above 100k  | Upto 20k                                                            | Above 20k        |             |                  |                  |     |            |                  |       |  |  |  |  |  |       |  |  |  |  |  |      |  |  |  |  |  |                |          |           |            |          |           |

Notes: 1. In case amount to be credited to supplier and the bills total does not match, accountants to prepare JV for debit or credit. 2. This set should only have 5 documents i.e., advice to credit to supplier, original bill, proof of delivery, original purchase order with barcode, original requisition. 3. Do not attach additional documents like weighment slips, RMC batch reports, duplicate documents, Eway bills, test reports, etc. 4. In Amount A, exclude transport, Hamali charges, etc., and instead include in Amount B. 5. This report must reach HO within one working day of approval by purchase officer/purchase manager.

**TAX-INVOICE****SANTHOSH TARPAULIN**

# 2-9-39/7/3, Forzenguda,  
Suryanagar, Old Alwal,  
Medchal, Malkajgiri District – 500 010.  
Telangana State

**GSTIN :36ATWPA1307P1ZC**

Email id: santhoshtarp@gmail.com

Cell: 9642662732

Bank Account : AXIS BANK

Acc.No.919020039284737

IFSC CODE :UTIB0001378

To SUMMIT SALES LLP  
5-4-187/3&3 IInd floor MG ROAD  
SECUNDERABAD 500003  
**GSTIN No. 36ACQFS2044C1Z7**

Invoice No: **159**

Invoice Date: 11/05/2022

P.O.No.88106/169770

P.O.Date: 09.05.2022

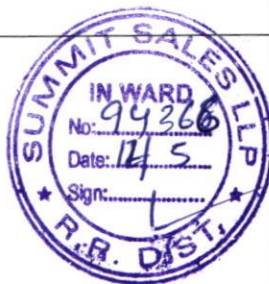
| Sl. No. | Descriptions                                       | Code SAC HSN | Qty       | Rate   | Amount Rs. Ps.  |
|---------|----------------------------------------------------|--------------|-----------|--------|-----------------|
| 1       | COVER BLOCS<br>ALL IN ONE RCC<br>200 nos X 25 bags | 6810         | 5000 NOS  | @ 0.85 | <b>4,250.00</b> |
| 2       | HDPE TARPAULIN<br>SIZE 24ft X 18ft 5 NOS           | 3926         | 2160 Q FT | @ 1.40 | <b>3,024.00</b> |

**Rupees in words**

**EIGHT THOUSAND FIVE HUNDRED EIGHTY  
THREE and THIRTY TWO PAISE ONLY**

**Total :: 7,274.00****CGST @ 9 % 654.66****SGST @ 9 % 654.66****IGST 18% ::****Grand Total :: 8,583.32****For SANTHOSH TARPAULIN**

Receiver Signature &amp; Seal

**Authorized Signatory**

|                         |             |
|-------------------------|-------------|
| <b>INWARD</b>           |             |
| Inward No: 8133         | Dt: 11/5/22 |
| MRN No: 107111          | Dt: 12/5/22 |
| Received By:            | Sign: 8     |
| <b>SUMMIT SALES LLP</b> |             |

To

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## Purchase Order

Page(s) 1 Of 1

09-05-2022 17:04:39



88106

27.04.22 12:24:12

From Company : **Summit Sales LLP**  
5-4-187/3&4, II nd floor, MG Road, Secunderabad-500003.  
G S T No. : 36ACQFS2044C1Z7

### Supplier Details

Santosh Tarpaulin  
2-9-39/7/3, Forzenguda, Suryanagar, Old Alwal, Medical Malkagiri Dist  
-500010

**GSTIN** 36ATWPA1307P1ZC

9642662732

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 88106      | 169770 |
| <b>Doc Date</b>   | 09-05-2022 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 09-05-2022 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Santosh Kumar**

Purchase Order for the Supply of following Items.

| Item Name                                                        | Qty      | Rate | Dis% | GST   | Amount          |
|------------------------------------------------------------------|----------|------|------|-------|-----------------|
| 1 6094 - Miscellaneous - Spacers - Other - nos<br>all in one-RCC | 5,000.00 | 0.85 | 0.00 | 18.00 | 5,015.00        |
| 2 6011 - Miscellaneous - Blue Sheet - 24 Ft x18 Ft - sft         | 2,160.00 | 1.40 | 0.00 | 18.00 | 3,568.32        |
| <b>Total Order Value . . .</b>                                   |          |      |      |       | <b>8,583.32</b> |

Rupees : Eight Thousand Five Hundred Eighty Three and Paise Thirty Two Only.

### Terms and Conditions :-

**Specification /** As per details given in the quotation.

**Payment Terms** After Delivery & Production of bill

**Tax** Inclusive of all taxes

**Delivery Date** Next Day.

**Delivery Location** Summit Housing LLP  
Cherlapally, Behind Kingston PG college, Hyderabad  
Phone. 9618244433, Hamendra

**Penalty For Delay** Nil

**Transportation** Transport cost shall be borne by us.

**Warranty** Nil

**Advance Paid** Nil

**Other Terms** We reserve the right to reject items not conforming to quality and specifications. Above order for Stock maintenance purpose.

**Completion Date** Nil

**Measurment** Nil

**Security** Nil

**Remarks**

For **Summit Sales LLP**

Authorised Signatory

Name :

11/05/2022

Accepted the above Terms And Conditions

For **Santosh Tarpaulin**

Name :

Date : \_/\_/

### Requisition Form

|                                         |                    |                  |       |              |        |                                                                                                                                                                                          |      |       |
|-----------------------------------------|--------------------|------------------|-------|--------------|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------|
| Company Name:                           |                    | SUMMIT SALES LLP |       | Date:        |        | 06.05.2022                                                                                                                                                                               |      |       |
| Site & Phase :                          |                    | SHLLP            |       | Time:        |        | 10:57                                                                                                                                                                                    |      |       |
| Supplier                                |                    |                  |       | Req.No.      |        | 169770                                                                                                                                                                                   |      |       |
| Material required before date:          |                    |                  |       |              | ID No. |                                                                                                                                                                                          |      | 76294 |
| N<br>o                                  | Description        |                  | Size  | Quantity     | Units  | Inward<br>No                                                                                                                                                                             | Date |       |
| 1.                                      | Spacers all in one |                  |       | 5000         | Nos    |                                                                                                                                                                                          |      |       |
| 2.                                      | Blue sheet 88106   |                  | 24x18 | 2160         | Sft    |                                                                                                                                                                                          |      |       |
| Remarks: For stock replenishig purpose. |                    |                  |       |              |        |                                                                                                                                                                                          |      |       |
| Prepared By                             |                    | Vanajakshi       |       | Approved by  |        | <div style="border: 2px solid blue; padding: 5px; text-align: center;"> <b>APPROVED BY</b><br/><br/> <b>07 MAY 2022</b><br/><br/> <b>SOHAM MODI</b><br/> <b>MANAGING DIRECTOR</b> </div> |      |       |
| Sign.& Date                             |                    | 06.05.2022       |       | Sign. & Date |        |                                                                                                                                                                                          |      |       |

Note: On receipt of material at site write inward number and date in last 2 columns.