

PURCHASE DIVISION
Advice for approval for credit to supplier

Date: 3/8/22		Prepared by: Hemoni		Serial no. 6850	
Supplier name: prabul saribang				HO inward no.	
Firm/Company: SHLUP		Project: SHLUP		HO received date	
PO/WO date: 19/8/22		PO/WO No. 90192		Scan ID.	

Sl no.	Bill no.	Bill date	Bill amount	Original attached
1.	PS/22-23/345	23/7/22	9,912/-	☐ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No
4.				☐ Yes ☐ No

Amount A – Bills total (Excluding Transport & Hamali Charges): 9,912/-

Proof of delivery by way of: ☒ DCs/bill ☐ Steel report ☐ RMC pour report ☐ Solid block report ☐ Installation report

MRN nos.: 109898	Proof of delivery matches MRN ☒ Yes ☐ No
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Amount B – Other Credits : Transportation charges

Amount C – Other Debits :

Amount D (D=A+B-C) – Amount to be credited to the supplier: 9,912/-

Amount E – PO / WO value: 9,912/-

Amount F – Difference (A – E):

Quantity received as per PO / WO ☒ Yes ☐ Excess received ☐ Short received ☐ Part received

Close PO / WO ☒ Yes ☐ No – wait for balance material ☐ Other

Payment – due date: 8/8/22

Remarks:

Approved by	Purchase Officer	Purchase Manager	M D	Accountant	Accounts Manager
Name:	Hemoni				
Sign:	Hemoni				
Date:	3/8/22				
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.

0283

(ORIGINAL FOR RECIPIENT)

PRAFUL SANITARI
3-6-429/6, SRI SAI TOWER,
St.No.4 HIMAYAT NAGAR
HYDERABAD
GSTIN/UIN: 36ACWPG4864A1ZG
State Name : Telangana, Code : 36
E-Mail : prafulsanitary@gmail.com
Buyer (Bill to)

Summit Sales LLP
5-4-187/3&4, IInd Floor, M.G Road
Secunderabad
GSTIN/UIN : 36ACQFS2044C1Z7
State Name : Telangana, Code : 36

Invoice No.	Dated
PS/22-23/ 345	23-Jul-22
Delivery Note	
Invoice	
Reference No. & Date.	Other References
	Credit
Buyer's Order No.	Dated
90197	19-Jul-22
Dispatch Doc No.	Delivery Note Date
Invoice	23-Jul-22
Dispatched through	Destination
Self	Cherlapally

Sl No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	Teflon Tape Output CGST Output SGST	3919	18 %	400 No:	30.00	No:	30 %	8,400.00 756.00 756.00
				Total				₹ 9,912.00

E. & O.E

Amount Chargeable (in words)
Indian Rupees Nine Thousand Nine Hundred Twelve Only

Amount Chargeable (in words)							
Indian Rupees Nine Thousand Nine Hundred Twelve Only		Taxable Value	Central Tax		State Tax		Total Tax Amount
HSN/SAC			Rate	Amount	Rate	Amount	
		8,400.00	9%	756.00	9%	756.00	1,512.00
			9%		9%		
			14%		14%		
3919							
99							
99							
	Total	8,400.00		756.00		756.00	1,512.00

Tax Amount (in words) : **Indian Rupees One Thousand Five Hundred Twelve Only**

Declaration
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

INWARD	
Inward No: 18465	Dr: 25/7/22
MRN No:	Dr:
Received By:	Sign: 
SUMMIT SALES LLP	





GST INVOICE

(DUPLICATE FOR TRANSPORTER)

PRAFUL SANITARY

3-6-429/6, SRI SAI TOWER,
St.No.4 HIMAYAT NAGAR
HYDERABAD
GSTIN/UIN: 36ACWPG4864A1ZG
State Name : Telangana, Code : 36
E-Mail : prafulsanitary@gmail.com

Buyer (Bill to)

Summit Sales LLP

5-4-187/3&4, IInd Floor, M.G Road
Secunderabad
GSTIN/UIN : 36ACQFS2044C1Z7
State Name : Telangana, Code : 36

Invoice No.

PS/22-23/ 345

Dated

23-Jul-22

Delivery Note

Invoice

Reference No. & Date.

Other References

Credit

Buyer's Order No.

90197

Dated

19-Jul-22

Dispatch Doc No.

Invoice

Delivery Note Date

23-Jul-22

Dispatched through

Self

Destination

Cherlapally

SI No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	Teflon Tape	3919	18 %	400 No:	30.00	No:	30 %	8,400.00
	Output CGST							756.00
	Output SGST							756.00
Total				400 No:				₹ 9,912.00

E. & O.E

Amount Chargeable (in words)

Indian Rupees Nine Thousand Nine Hundred Twelve Only

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
3919	8,400.00	9%	756.00	9%	756.00	1,512.00
99		9%		9%		
99		14%		14%		
Total	8,400.00		756.00		756.00	1,512.00

Tax Amount (in words) : Indian Rupees One Thousand Five Hundred Twelve Only

Company's PAN : ACWPG4864A

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.



for PRAFUL SANITARY

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

INWARD	
Inward No: 18165	Dr: 25/7/22
MRN No: 109898	Dr: 25/7/22
Received By:	Sign: [Signature]
SUMMIT SALES LLP	

Handwritten: 11

CHAVU	
RECEIVED JAN 1 1962	
U.S. AIR FORCE	
HONOLULU, HAWAII	
1123172	

PURCHASE DIVISION
Advice for approval for credit to supplier

Date: 3/8/22		Prepared by: Hemu		Serial no. 6850	
Supplier name: prabul saribany		Project: SHMP		HO inward no.	
Firm/Company: SS&P		PO/WO No. 90192		HO received date	
PO/WO date: 19/7/22		Scan ID.			

Sl no.	Bill no.	Bill date	Bill amount	Original attached
1.	PS/22-23/345	23/7/22	9,912/-	☐ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No
4.				☐ Yes ☐ No

Amount A – Bills total (Excluding Transport & Hamali Charges): 9,912/-

Proof of delivery by way of: ☒ DCs/bill ☐ Steel report ☐ RMC pour report ☐ Solid block report ☐ Installation report

MRN nos.: 109898	Proof of delivery matches MRN ☒ Yes ☐ No
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Amount B – Other Credits : Transportation charges -

Amount C – Other Debits : -

Amount D (D=A+B-C) – Amount to be credited to the supplier: 9,912/-

Amount E – PO / WO value: 9,912/-

Amount F – Difference (A – E): -

Quantity received as per PO / WO ☒ Yes ☐ Excess received ☐ Short received ☐ Part received

Close PO / WO ☒ Yes ☐ No – wait for balance material ☐ Other

Payment – due date: 8/8/22

Remarks:

Approved by	Purchase Officer	Purchase Manager	M D	Accountant	Accounts Manager
Name:	Hemu				
Sign:	Hemu				
Date:	3/8/22				
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 weightment 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.

0088

GST INVOICE

(DUPLICATE FOR TRANSPORTER)

PRAFUL SANITARY
 3-6-429/6, SRI SAI TOWER,
 St.No.4 HIMAYAT NAGAR
 HYDERABAD
 GSTIN/UIN: 36ACWPG4864A1ZG
 State Name : Telangana, Code : 36
 E-Mail : prafulsanitary@gmail.com
 Buyer (Bill to)
Summit Sales LLP
 5-4-187/3&4, IInd Floor, M.G Road
 Secunderabad
 GSTIN/UIN : 36ACQFS2044C1Z7
 State Name : Telangana, Code : 36

Invoice No. PS/22-23/ 345	Dated 23-Jul-22
Delivery Note	
Invoice	
Reference No. & Date.	Other References Credit
Buyer's Order No. 90197	Dated 19-Jul-22
Dispatch Doc No. Invoice	Delivery Note Date 23-Jul-22
Dispatched through Self	Destination Cherlapally

SI No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	Teflon Tape	3919	18 %	400 No:	30.00	No:	30 %	8,400.00
	Output CGST							756.00
	Output SGST							756.00
Total				400 No:				₹ 9,912.00

Amount Chargeable (in words)

E. & O.E

Indian Rupees Nine Thousand Nine Hundred Twelve Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
3919	8,400.00	9%	756.00	9%	756.00	1,512.00
99		9%		9%		
99		14%		14%		
Total	8,400.00		756.00		756.00	1,512.00

Tax Amount (in words) : **Indian Rupees One Thousand Five Hundred Twelve Only**Company's PAN : **ACWPG4864A**

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.



for PRAFUL SANITARY

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

INWARD	
Inward No: 18165	Dr: 23/7/22
MRN No: 109898	Dr: 23/7/22
Received By:	Sign: [Signature]
SUMMIT SALES LLP	

NAME	
ADDRESS	
CITY	
STATE	
ZIP	
DATE	
SIGNATURE	

Purchase Order

Page(s) 1 Of 1

19-07-2022 14:07:43

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


90197
14.07.22 12:47:27

Supplier Details

Praful Sanitary
3-6-138/5, Himayat Nagar, Hyderabad.

Doc No 90197 169994
Doc Date 19-07-2022
Quote No Nil
Quote Date 19-07-2022
SupplyType Supply

GSTIN 36ACWPG864A1ZG 40077300
65526886. 9849624797

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 388600 - GENE-General Items - Teflon tapes-- - - - Nos	400.00	30.00	30.00	18.00	9,912.00
Total Order Value . . .					9,912.00

Rupees : Nine Thousand Nine Hundred Twelve Only.

Terms and Conditions :-

Specification /	As per details given in the quotation.
Payment Terms	After delivery of all materials & production of bill.
Tax	All taxes included in above price.
Delivery Date	Within 2days.
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	5yrs on SI.no.1,2
Advance Paid	Nil
Other Terms	We reserve the right to reject items not conforming to quality and specifications. Above order for Stock Replenishing purpose.
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	Original invoice + copy of proof of delivery is required to process invoice for payment . Do not send original invoice to site. Original invoices must be sent to HO office or purchase site office. Proof of delivery /DC can be sent by email.

For **Summit Sales LLP**

Authorised Signatory



Name :

Accepted the above Terms And Conditions

For **Praful Sanitary**

Name : _____

Date : __/__/__

Requisition Form

Company Name: SLLP

Site & Phase : SHLLP

Supplier:

Material
required before

Date: 14.07.2022

Time: 11:00

Req. No. 169994

ID No. 78133

S No	Item	Qty required	Qty available at site	Order Qty	Inward No	Inward Date
1	PLCP7891-Plumbing-CP Health Faucet----Nos	35	23	35		
2	GENE3886-General Items-Teflon tapes----Nos	400	222	400		
3						
4						
5						
6						
7						
8						
9						
10						

90196
90197

Remarks: For Stock Replenishing Puropose.

Engineer

Vanajakshi

Prepared By:

Approved By:

Sign & Date:

Project
Manager

Purchase

MD

APPROVED BY

15 JUL 2022

SOHAM MODI
MANAGING DIRECTOR

(ORIGINAL FOR RECIPIENT)

Summit Sales LLP
5-4-187/3&4, IInd Floor, M.G Road
Secunderabad
GSTIN/UIN : 36ACQFS2044C1Z7
State Name : Telangana, Code : 36

Invoice No.	Dated
PS/22-23/ 345	23-Jul-22
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Invoice	Other References
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				Total	400 No:			₹ 9,912.00

E. & O.E

Amount Chargeable (in words)
Indian Rupees Nine Thousand Nine Hundred Twelve Only

Amount Chargeable (in words)		Central Tax		State Tax		Total
Indian Rupees Nine Thousand Nine Hundred Twelve Only		Taxable Value	Rate	Amount	Rate	Tax Amount
HSN/SAC		8,400.00	9%	756.00	9%	756.00
			9%		9%	
			14%		14%	
3919						
99						
99						
Total		8,400.00		756.00		756.00
						1,512.00

Tax Amount (in words) : **Indian Rupees One Thousand Five Hundred Twelve Only**

Company's PAN : ACWPG4864A

Declaration
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This is a Computer Generated Invoice

Authorised Signatory

INWARD	
Inward No: 18465	Dr: 25/7/72
MRN No:	Dr:
Received By:	Sign: 
SUMMIT SALES LLP	



