



Supplier name Firm/Company Project PO/WO date PO/WO No. SI no. Bill no. Bill amount Original attack	Date:	13/8/2	Prepared by	9/2	Serial no	1.	
PO/WO date PO/WO No. PO/W	Supplier name	13/01	10-21	10-	HO inwa	rd no.	
SI no. Bill no. Bill date Bill amount Original attact 1. PS 22-23 U24 (1) 8	Firm/Company	Meello	Project	NG	HO recei	ved date	
Bill no. Bill no. Bill date Bill amount Original attact I PS 22-23 U24 (18	PO/WO date	olola	PO/WO No.		Soon ID		
1. PS 22-23 U24 118	SI no.		E	3ill date	Bill amoun	t	Original attached
3. 4. Amount A — Bills total (Excluding Transport & Hamali Charges): Proof of delivery by way of DCs/bill	1. 0	clas a.l.	1	-1 -			
3. '4. Amount A — Bills total (Excluding Transport & Hamali Charges): Proof of delivery by way of: DCs/bill Steel report RMC pour report Solid block report Installation report MRN nos.: Amount B — Other Credits: Transportation charges Amount C — Other Debits: Amount D (D=A+B-C) — Amount to be credited to the supplier: 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 Remarks: Approved by Purchase Officer Manager Manager Name: Sign: Date 13 Amales		3 22 23 1	124 11	8/2	1,699		
Amount A – Bills total (Excluding Transport & Hamali Charges): Proof of delivery by way of: DCs/bill Steel report RMC pour report Solid block report Installation report MRN nos.: MRN nos.: Amount B – Other Credits: Transportation charges Amount C – Other Debits: Amount D (D=A+B-C) – Amount to be credited to the supplier: Amount E – PO / WO value: Amount F – Difference (A – E): Quantity received as per PO / WO Yes Excess received Short received Part received Close PO / WO Payment – due date Remarks: Approved by Purchase Officer Purchase M D Accountant Accounts Manager Name: Yes No Manager M D Accountant Accounts Manager Manager Date 13 Accounts Date 13 Accountant Accounts Manager M D Accountant Accounts Accounts Manager M D Accountant Accounts Manager Manager M D Accountant Accounts Manager Manager Date M D Accountant Manager	3.						
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Proof of delivery by way of DCs/bill Steel report RMC pour report Solid block report Installation report MRN Proof of delivery matches MRN Yes No Amount B - Other Credits : Transportation charges Amount C - Other Debits : Amount D (D=A+B-C) - Amount to be credited to the supplier: Amount E - PO / WO value: 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 22/8 W Approved by Purchase Officer Purchase M D Accountant Accounts Manager Name: Manager M D Accountant Accounts Manager M D Manager Manager		e total (Evoluding Tree					□ Yes □ No
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Close PO / WO Payment – due date Remarks: Approved by Purchase Officer Purchase Manager Name: Sign: Date Yes □ No – wait for balance material □ Other Accounts Manager M D Accountant Accounts Manager	Amount F – Diffe	rence (A – E):				110	7
Close PO / WO Payment – due date Remarks: Approved by Purchase Officer Purchase M D Accountant Accounts Manager Name: Sign: Date 13 day Yes □ No – wait for balance material □ Other Approved by Purchase M D Accountant Accounts Manager	Quantity received	as per PO/WO	Yes	□ Excess recei	ved □ Short received	d □ Part r	eceived
Payment – due date Remarks: Approved by Purchase Officer Purchase M D Accountant Accounts Manager Name: Manager Date 13 day	Close PO / WO						
Remarks: Approved by Purchase Officer Purchase M D Accountant Accounts Manager Name: Manager Date 13 day	Payment – due dat	te		1	1		
Name: Manager Manager Sign: Town Date 13 dru	2	,		221	8/20		
Name: Manager Manager Sign: Town Date 13 dru							
Name: Manager Name: Manager Date Manager	Approved by	Purchase Officer	Purchase	M D	Accour	ntant	Accounts
Sign: Date 13 dru	Name:	0.4	Manager		A. P. PORTON, 1971, 1970.		
Date 13 dru		Morro					
1382		Momo					*
Approval limit Upto 20k Above 20k Above 100k Upto 20k Above 20k	4C-3014439	13/8/20					
	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.

36. Y
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)
Modi Reality Pocharam LLP 5-4-183/3&4, IInd Floor Soham Mansion, M G Road Secinderabad. GSTIN/UIN: 36ABIFM1836H1Z7 State Name: Telangana, Code: 36

Invoice No.	Dated
PS/22-23/ 424	11-Aug-22
Delivery Note	
nvoice	
Reference No. & Date.	Other References
	Credit
Buyer's Order No.	Dated
90775	8-Aug-22
Dispatch Doc No.	Delivery Note Date
Invoice	11-Aug-22
Dispatched through	Destination
Self	Pocharam

31	Description of	HSN/SAC		Quantity	Rate	per	Disc. %	Amount
0.	Goods and Services	2010	Rate					
	500mm Orissa Pan(White)	6910	18 %	3 No:	600.00	No:	20 %	1,440.0
	Output CGS	т						129.6
	Output SGS	T						129.6
-	Less: ROUNDING OF	-						(-)0.2
						-		
	OOP ENTERS							
	TO MARD 2							
	S (Sign 41812) = [
	COBA							
+	Tot	al		3 No:				₹ 1,699.0

Amount Chargeable (in words)

d Civ Hundred Ninety Nine Only

E. & O.E

HSN/SAC	Taxable	Cen	tral Tax	Sta	ate Tax	Total
	Value	Rate	Amount	Rate	Amount	Tax Amount
6910 99	1,440.00	9% 9% 14%	129.60	9% 9% 14%	129.60	259.20
99 Total	1,440.00		129.60		129.60	259.20

Tax Amount (in words): Indian Rupees Two Hundred Fifty Nine and Twenty paise 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





Purchase Order

Page(s) 1 Of 1

08-08-2022 14:15:15

90775

29.07.22 12:09:35

From Company: Modi Realty Pocharam LLP

5-4-183/3&4, II nd Floor, Soham Mansion, MG Road, Secunderabac

G S T No.: 36ABIFM1836H1Z7

Supplier Details				
Praful Sanitary		Doc No	90775	182091
3-6-138/5, Himayat Nagar, Hyderaba	d.	Doc Date	08-08-202	22
		Quote No	NIL	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	08-08-202	22
65526886.	9849624797	SupplyType	Supply	

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 292000 - SACP-Sanitary-CP - WC-Indian 500MM - Nos	3.00	600.00	20.00	18.00	1,699.20
pees : One Thousand Six Hundred Ninty Nine and Paise Twen		Total Or	der Value	e	1,699.20

Terms and Conditions :-

Specification /

All items shall be of Sudhakar brand/company

Payment Terms

After Delivery & Production of bill

Tax

All taxes included in above price.

Delivery Date

Next Working Day.

Delivery Location

Nilgiri Heights

pocharam

Phone. .9849497484

Penality 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. for A-Block Upper basement Labour toilets purpose

Completion Date

NA

Measurment Security Nil Nil

Remarks

Original invoice + Copy of proof of delivery is required to process invoice for payment.DO NOT send original invoice to site.Original invoice must be sent to HO Office or Purchase site office.Proof of delivery/DC can be sent by email.

For Modi Realty Pocharam LLP

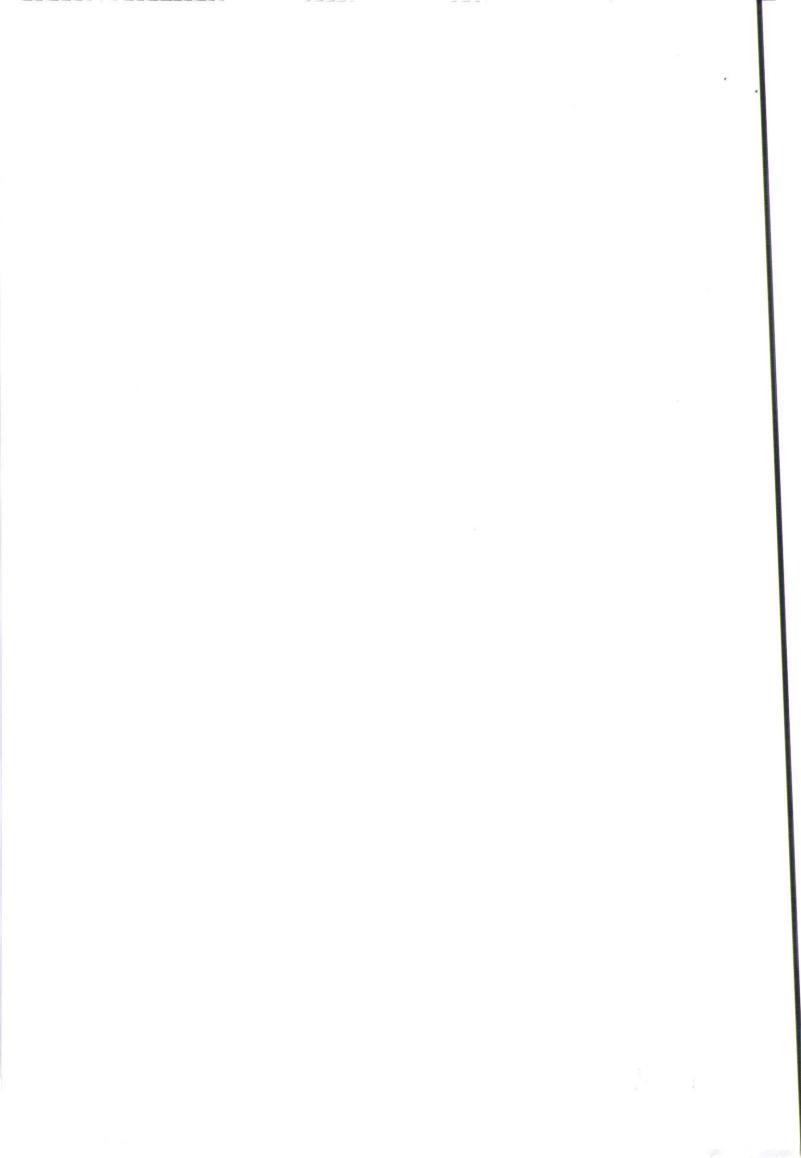
Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary**

Name :

Date : __/__/___



Requisition Form	n					
Company Name: MRPLLP	MRPLLP	Date:	04-08-2022			
Site & Phase:	NGH	Time:	16:30			
Flat/Block no.	Labour Toilets					
Supplier:		Req. No.	182091			
Material required before date:	1 06-08-2022	ID No.	6198t			
S No	Item	Qty required	Oty available at site	Order Qty	Order Qty Inward No	Inward Date
1	SACP2920-Sanitary-CP-WC-Indian500MM-Nos	3		3		
2						
3						
4	96498					
5						
9	70					
7	1					
∞	200					
6	9					
10						
Remarks:	For Block - A - Upper Basement - Labour Toilets purpose					
	Engineer	Project	- F	Purchase		MD
Prepared By:	Vijay Raj	Manager	0	03/2		
Approved By:		V	APPRA	1600	ETA ETA	
Sign & Date:	04-08-2022		0	908 0		
				A STATE OF THE PARTY OF THE PAR	ABE 3	

P. PRAPITY OF PURCHAN