PURCHASE DIVISION Advice for approval for credit to supplier



Date:	14/11/22	Prepared	d by	Minis		Serial no.		10559
Supplier name		Sanita	284	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		HO inward	l no.	
Firm/Company	SSLLP	Project	0	SHLL	P	HO receive	ed date	
PO/WO date	09/11/22	PO/WO	No.	93490		Scan ID.		
Sl no.	Bill no.		Bill	date	I	Bill amount		Original attached
1	796 /22-2	3	15/11	22	11,	234 L		Yes 🗆 No
2.	10/202		19 1			,		□ Yes □ No
3.								□ Yes □ No
4.								□ Yes □ No
Amount A – Bills	total (Excluding Tran	sport & Ha	amali Charg	ges):			11,	234
Proof of delivery b	y way of: DCs/bill	□ Steel r	eport RM	C pour repor	rt 🗆 Sol	id block rep		
MRN	113881				Proof o	of delivery		Yes 🗆 No
nos.:					matche	S IVIKIN		
	Credits : Transportati	on charges	8					_
Amount C –Other	Debits :							
Amount D (D=A+)	B-C) – Amount to be	credited to	the supplie	er:		~	11,	2341-
Amount E – PO / V	WO value:						F1	, 234
Amount F – Differ	rence (A – E):		7					
Quantity received	as per PO /WO		Yes 🗆 l	Excess receiv	ved □ Sh	ort received	□ Part r	received
Close PO / WO	9		Yes 🗆 1	No – wait fo	r balance	material	Other	
Payment – due date	e		21	11/22		9		
Remarks:		\	Fina					
				A - D - /				
Approved by	Purchase Officer		chase	MD		Accoun	itant	Accounts Manager
Name:		APPR	MED					Wanager
Sign:		1 7 NO	V 2022					
Date		MINISH	PARIKH					
Approval limit	Upto 20k MAN	AGERVER	OCUREME	Above 1001	k	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.

Dated

Invoice No.

PF	RAFUL SANITARY			Invoi	ce No.		Dat		
3-6	6-429/6, SRI SAI TOWER,				22-23/ 796	i	15-	Nov-22	2
	.No.4 HIMAYAT NAGAR /DERABAD				ery Note				
GS	STIN/UIN: 36ACWPG4864A1ZG			Invo	rence No.	9 Dete	041	er Refe	
	ate Name:Telangana, Code:36 Mail:prafulsanitary@gmail.com			Kele	rence No.	a Date.			rences
	yer (Bill to)			Buve	er's Order N	lo	Dat	edit	
	ummit Sales LLP			9379				lov-22	
	4-187/3&4, IInd Floor, M.G Road				atch Doc N	lo.		ivery No	te Date
	ecunderabad			Invo	ice		02 22 23	Nov-22	
	STIN/UIN: 36ACQFS2044C1Z7 ate Name: Telangana, Code: 36			Disp	atched thro	ough	Des	stination	
30	ate Name : Telangana, Code : 36			Self			Ch	erlapal	ly
SI	Description of	HSN/SA	AC (GST	Quantity	Rate	per	Disc. %	Amount
No.	Goods and Services		F	Rate	•				
1	Teflon Tape	3919		18 %	400 No:	34.00	No:	30 %	9,520.00
					100 .10.			1	3,320.00
	Output CGST								856.80
	Output SGST								856.80
	ROUNDING OFF								0.40
			- 1						
			1						
	•								
			1						
	PERILES								
	2 INWARD 4								
	2/No 4258 17								
	10 Date 15 Line 15								
	(O Sign								

	OEC'BA								
-									
-	Total	-	-		400 No:		+	-	T 44 004 00
Δm	ount Chargeable (in words)				400 NO.				₹ 11,234.00 E. & O.E
	dian Rupees Eleven Thousand Two Hundred Thirty Fou	r Only							E. & O.E
****	HSN/SAC		Taxab	No.	Central	Tov	Cta	ite Tax	Tetal
	Hollione		Value				Rate	Amour	Total nt Tax Amount
	19		9,520		9%	856.80	9%	856	
99					9%		9%		
99		Total	9,520	0.00	14%	856.80	14%	856	.80 1,713.60
Tax								1	.00 1,710.00
Tax	Amount (in words) : Indian Rupees One Thousand Seven Hu	indred	Ihirt	teen	and Sixty	paise O	nly	100	A.
		1						(6VY)	AN
								3	121
							- 11	E HIMAN	TNAGAR)
							11	*/ //	1211
							1	1300	2002
11110	mpany's PAN : ACWPG4864A							for PR	RAFUL SANITARY
	claration e declare that this invoice shows the actual price of the goods							-	
	scribed and that all particulars are true and correct.							Δ	uthorised Signatory
	SUBJECT TO HYDERA	ABAD JUR	RISDIC	TION					autoriosa oigitatory
					A CHARLEST OF THE OWNER, WHEN	The same of the sa			
	This is a Computer C	senerated	IUAQIC	8	AS SA	600			
	INWARD			1	1	1011			
	Inward No. 18996 Dt: 15, 11, 22			1/3	IN WAT	80/5/			
	MRN No: 113 881 Dt: 16 11 2			15	No: Lo Jo	TITLE			
	Committee of the commit			11 00	10	1 1	2		

Received By:

SUMMIT SALES LL

Purchase Order

Pag	ale	11.0	Of	1

09-11-2022 17:12:56

From Company: Summit Sales LLP

5-4-187/3&4, II nd floor, MG Road, Secunderabad-500003.

G S T No.: 36ACQFS2044C1Z7



01.11.22 2:56:54

Supplier Details				
Praful Sanitary		Doc No	93790	170371
3-6-138/5, Himayat Nagar, Hyde	erabad.	Doc Date	09-11-202	22
		Quote No	NIL	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	07-11-202	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 388600 - GENE-General Items - Teflon tapes Nos	400.00	34.00	30.00	18.00	11,233.60
-		Total Or	der Value	e	11,233.60

Terms and Conditions :-

Specification /

As per details given in the quotation. Sl.no.1,2-'Camry' brand

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

Penality For Delay Nil

Transportation

Transport cost shall be borne by us.

Warranty

5yrs on Sl.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 Replenshing

purpose

Completion Date

NII

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 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

Accepted the above Terms And Conditions

For Praful Sanitary

Name:

Name : _____

Date : __/__/

TOW WAHOS
APPROVED
Manager
Parchago
200 262 200
6480 6480
24 38 24
400 292 400
10000 3000 10000
400 20 400
at Site
Qty Qty available Order Qty Inward No
IDNo. 81346
red. No. 1/03/1
-
Time:
Date: 07.11.2022