PURCHASE DIVISION Advice for approval for credit to supplier



Date:	22/11/22	Prepare	d by	Minis	h	Serial no.		10760
Supplier name	Prajul	Sangtasi	1	1 11112		HO inward	d no.	
Firm/Company	SCIL	Project		SHLL	P	HO receiv	ed date	
PO/WO date	15/11/	PO/WO	No.	9402	1	Scan ID.		
Sl no.	Bill no.		Bill	date	1	Bill amount		Original attached
1.	824	***	21/1	1/22	51	, 129		Yes 🗆 No
2.	Contract Con	Figure and the	X. .	,, -		1		□ Yes □ No
3.	and the the law of the second	and grant grant						□ Yes □ No
4.	Andreas Royales and Service	SS. 20.000 A						□ Yes □ No
Amount A – B	ills total (Excluding	Transport & H	amali Char	ges):			51,1	29-
Proof of delive	ry by way of: DCs	s/bill Steel r	eport \square RM	IC pour repor	rt 🗆 Sol	id block rep	ort 🗆 Ins	tallation report
MRN nos.:	114131				Proof o	of delivery s MRN		Yes □ No
Amount B -Ot	her Credits : Transpo	ortation charges	S	-			-	
Amount C –Ot	her Debits :						٠	
Amount D (D=	A+B-C) – Amount t	to be credited to	o the suppli	er:			51,	129
Amount E – PO) / WO value:						51,	129
Amount F – Di	fference (A – E):	n .	7					•
Quantity receiv	ed as per PO/WO		✓ Yes □	Excess recei	ved 🗆 Sh	ort received	□ Part re	eceived
Close PO / WC	The Property of the Control of the C		o Yes □	No – wait for	r balance	material	Other	
Payment – due	date	03000	201	11/22				
Remarks:	The little of good to a little broken		fina	al bill				
Constitution (See Sec.	V. F. Spirovice in the control of all that	and the New York						
Approved b	y Purchase Offi	APPMa	chase	M D		Accoun	tant	Accounts Manager
Name:								Manager
Sign:		2 2 NOV	2022					
Date		MINISHP		17				
Approval limit	Upto 20k	ANAGER PRO	OKEMEN	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.

e-Way Bill No. Dated

GST INVOICE

PRAFUL SANITARY

Invoice No.

	6-429/6,SRI SAI TOWER,			PS/22	2-23/ 82	4 1	11558134799	21-	Nov-22	2
	t.No.4 HIMAYAT NAGAR YDERABAD				ery No	te				
G	STIN/UIN: 36ACWPG4864A1ZG			Invo		NIO 0	k Date.	Oth	er Refe	
	tate Name: Telangana, Code: 36			Kele	rence	INO. c	k Date.	000000		rences
_	-Mail : prafulsanitary@gmail.com uyer (Bill to)			Buye	r's Ord	lar N		Dat	edit	
	ummit Sales LLP			100000000000000000000000000000000000000		iei ivi	U.			
100	4-187/3&4, IInd Floor, M.G Road			9402	atch D	oc N		-	Nov-22	te Date
	ecunderabad					00 140	J.	100000000000000000000000000000000000000		
	STIN/UIN : 36ACQFS2044C1Z7			Disp	atched	thro	uah	-	Nov-22 stination	
St	tate Name : Telangana, Code : 36			Self		uno	ugii	100000000000000000000000000000000000000	erlapal	
						ng/L R	R-RR No.		tor Vehic	
				J 0		. 3			10UA9	
								10	100/3	700
SI No.		HSN	/SAC	GST Rate	Quan	itity	Rate	per	Disc. %	Amount
1	CP Bottle Trap	8481		18 %	30	No:	1,176.00	No:	35 %	22,932.00
2	25mm Extension Nipple	8481		18 %			72.00			6,048.00
	CP Grating Square (Plain)	7326	3	18 %	50	No:	190.00	No:	30 %	6,650.00
	Waste Coupling Half Thread	8481		18 %	40	No:	275.00	No:	30 %	7,700.00
										43,330.00
	Output CGST	1								3,899.70
1	Output SGST									3,899.70
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	112 Sign									

		1		9						
	Total				240	No:				₹ 51,129.00
Am	nount Chargeable (in words)									E. & O.E
In	dian Rupees Fifty One Thousand One Hundred Twenty I	Nine	Only							
	HSN/SAC		Taxa	_		tral T			te Tax	Total
0.0	0.4		Val		Rate			ate	Amour	
	181 326		36,68	50.00	9%		301.20 598.50	9%	3,301 598	
13		otal	43,33		3 /0		399.70	3 70	3,899	
T-										THE PERSON NAMED IN COLUMN TWO
1a	x Amount (in words): Indian Rupees Seven Thousand Seven I	Hund	rea N	linety	Nine	and	Forty pa	ise C	only	
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									THIMAY!	NAGAR
								1	*	10:11
Co	ompany's PAN : ACWPG4864A			-					for PR	AFUL SANITARY
	claration								CHI	O CONTRICT
W	e declare that this invoice shows the actual price of the goods									
de	escribed and that all particulars are true and correct.								A	uthorised Signatory
	SUBJECT TO HYDERA			100						
	INWARD This is a Computer G	Generat	ed Invo	ce	DAI	1				
	Inward No. 9017 Dt. 2111124		1	12000	1	la				
	Inward in Dulah		1151	414 Mg	AKD	1-1				

MRN No: 16 3

SUMMIT SALES LLP

Dt: 22 11 Sign: C

Purchase Order

2200	(e)	1 Of	1
aye	(2)	101	

16-11-2022 10:20:50

From Company: Summit Sales LLP

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

G S T No.: 36ACQFS2044C1Z7



Supplier Details				
Praful Sanitary		Doc No	94026	170399
3-6-138/5, Himayat Nagar, Hyd	derabad.	Doc Date	15-11-202	22
		Quote No	Nil	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	12-11-202	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 930300 - PLCP-Plumbing - CP Bottle Trap Nos	30.00	1,176.00	35.00	18.00	27,059.76
2 792000 - PLCP-Plumbing - CP Extension Nipple 12X25mm - Nos	120.00	72.00	30.00	18.00	7,136.64
3 485800 - PLCP-Plumbing - CP Double Sq Jali Nos	50.00	190.00	30.00	18.00	7,847.00
4 338100 - PLCP-Plumbing - CP Wash Basin Waste Coupling Nos	40.00	275.00	30.00	18.00	9,086.00

Total Order Value . . . 51,129.40 Rupees: Fifty One Thousand One Hundred Twenty Nine and Paise Fourty Only.

Terms and Conditions :=

Specification /

All items shall be of HB brand/company

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

Penality For Delay

Transportation

Transport cost shall be borne by us.

Warranty

1 Year

Advance Paid

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Above order for Stock repleneshing purpose.

O Other

Completion Date

NA

Measurment

Nil

Security

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 Summit Sales LLP Authorised Signatory

Accepted the above Terms And Conditions

For Praful Sanitary

FOR MDs APPROVAL

Replenishing SSIAP stock

High Value/quantity beyond limits.

Po/Req. processed-post approval.

☐ Approval for technical details/clarification.

Date : __/__/_

SOHAM MODI	SOHA					Sign & Date:
1 NOV 2553	1 6 10				Minish	Approved By:
WED BY	APPROVED				Ashajyothi	Prepared By:
Ð	MD	Purchase		Project Manager	Engineer	
-					For Stock Replenishing purpose	Remarks:
		30	5	30	PLCP7891-Plumbing-CP Health FaucetNos	10
		40	33	40	PLCP3381-Plumbing-CP Wash Basin Waste CouplingNos	9
		120	67	120	PLCP7920-Plumbing-CP Extension Nipple12X25MM-Nos	00
		50	32	50	PLCP4858-Plumbing-CP Double Sq JaliNos	7
		30	72	30	PLCP9303-Plumbing-CP Bottle TrapNos	6
		50	192	50	PLCP7682-Plumbing-CP Angle CockNos	5
		20	15	20		4
		10	44	10	PLCP9117-Plumbing-CP Shower ArmNos	3
		10	34	10	PLCP7791-Plumbing-CP Sink Cock with Swivel SpoutNos	2
		20	27	20	PLCP6074-Plumbing-CP Wall MixtureNos	
Inward Date		Order Qty Inward No	Qty available at site	Qty required	Item	S No
			81560	ID No.		Material required before date:
			170399	Req. No.		Supplier:
					No.	Unit No./Block No.
				Time:	SHLLP	Site & Phase:
			12.11.2022	Date:	SSLLP	Company Name:
						Requisition Form