PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	11/07/23	Prepared by	V. RAVI	Serial no.	18638
Supplier name	Prafull Sanitary.			HO inward no.	
Firm/Company	S.S.LLP	Project	SHLLP	HO received date	
PO/WO date	10/9/22	PO/WO No.	91782.	Scan ID.	

Sl no.	Bill no.	Bill date	Bill amount	Original attached
1.	558	26/9/22	9020-00	☑ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No
4.				☐ Yes ☐ No

Amount A – Bills total (Excluding Transport & Hamali Charges):	9020-00
Proof of delivery by way of: ☑ DCs/bill ☐ Steel report ☐ RMC pour report ☐ Solid block report ☐ Installation report	
MRN nos.: 112187	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:	9020-00
Amount E – PO / WO value:	55,515-46
Amount F – Difference (A – E):	46,495.46
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	15/7/23
Remarks:	find bill & close this po.

Approved by	Purchase Officer	Purchase Manager	M D	Accountant	Accounts Manager
Name:		V. RAVI			
Sign:					
Date		11/7/23			
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.

MODI PROPERTIES PVT. LTD. INWARD No. 1369 Date 11/7/23 Sign SECUNDERABAD

Form for closure of purchase order

PO no.:	91782	PO date:	10/9/22 (170168)	Req. no.:	170168	Advice Scan ID	
Barcoded PO available	☐ Y/☑ N	Invoice original available	☐Y/☐N	☑Copy available	POD available	☑Y/☐ N	

Data required from site/engineers:

MRN nos. related to PO	112187	
☐ Part material received.	☑ Full material received.	☐ Material not received.
☐ Close PO – Balance material will be re-ordered by new requisition.		
☐ Cancel PO. Material not required.	☐ Cancel PO. Material will be re-ordered by new requisition	
☐ Keep PO open. Material required.	☐ Keep PO open. Work under progress.	
Remarks by engineer:	All Material received.	

Notes: 1. Provide details of material received by way of separate attachment. 2. Provide scanned copy of DCs/proof of delivery + PO. 3. Provide copies of invoices if available. 4. This entire set to be scanned and sent to Ravi.

Prepared by: V. RAVI/VASU	Sign: for	Date: 10/07/23.

Data required from accounts:

☐	Checked with E&D for receipt of bills.	
☐ Bills not received against this PO.	☑ Part bill received against this PO.	☐ All bills received against this PO.
☐ Advance paid against this PO	Amount paid:	Date of payment:

Details of part bill received:

Sl. No.	Bill no.	Bill date	Bill amount	Cr. given to supplier
1.	558	16/9/22	46,496/-	Yes
2.				
3.				
4.				
5.				
6.				
7.				

Remarks by Accountants:

Prepared by: D. Saranya	Sign:	Date: 10/7/23

Notes: 1. POs/WOs issued for turnkey works - may have been processed by E&D. Check before filling the above.

Prepared by:	Sign:	Date:

Remarks by Ravi + details of bills to be approved:

Sl. No.	Bill no.	Bill date	Bill amount	MRN no.
1.	PS/22-23/591	26.09.22	9020-00	112187.
2.				
3.				
4.				

Remarks: Need MD's Approval for enclosed invoice.

Prepared by: Ravi	Sign:	Date: 10/7/23.

Advice by MD - action to be taken.

☐ Get certified bill from supplier (not original).		☐ Prepare bill in SSLLP for material supplied.	
☑	Thereafter, prepare advice for credit to supplier and send to Soham for processing.		
☑	Close PO	☐	Keep PO open. Material awaited
☐	Accounts to be reconciled with supplier. Get supplier's ledger.		

Remarks:

Approved by: Soham	Sign:	Date:

APPROVED BY
11 JUL 2023
SOHAM MODI
MANAGING DIRECTOR

Purchase Order

 10-07-2023 14:50:33 Original / Office Copy / Purchase Div.Copy

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 3-6-138/5, Himayat Nagar, Hyderabad.	**Doc No**	91782	170168
	Doc Date	10-09-2022	
	Quote No	NIL	
GSTIN 36ACWPG864A1ZG 40077300 65526886. 9849624797	**Quote Date**	08-09-2022	
	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	485800 - PLCP-Plumbing - CP Double Sq Jali-- - - - Nos	100.00	190.00	30.00	18.00	15,694.00
3	792000 - PLCP-Plumbing - CP Extension Nipple-- - 12X25mm - Nos	100.00	72.00	30.00	18.00	5,947.20
4	338100 - PLCP-Plumbing - CP Wash Basin Waste Coupling -- - - - Nos	30.00	275.00	30.00	18.00	6,814.50
					Total Order Value . . .	**55,515.46**

Rupees : Fifty Five Thousand Five Hundred Fifteen and Paise Fourty Six Only.

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

Books of accounts verified and no bills wrt this PO were received by accounts
Name: D. Narayo.
Sign:
Date: 10/7/23

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 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***

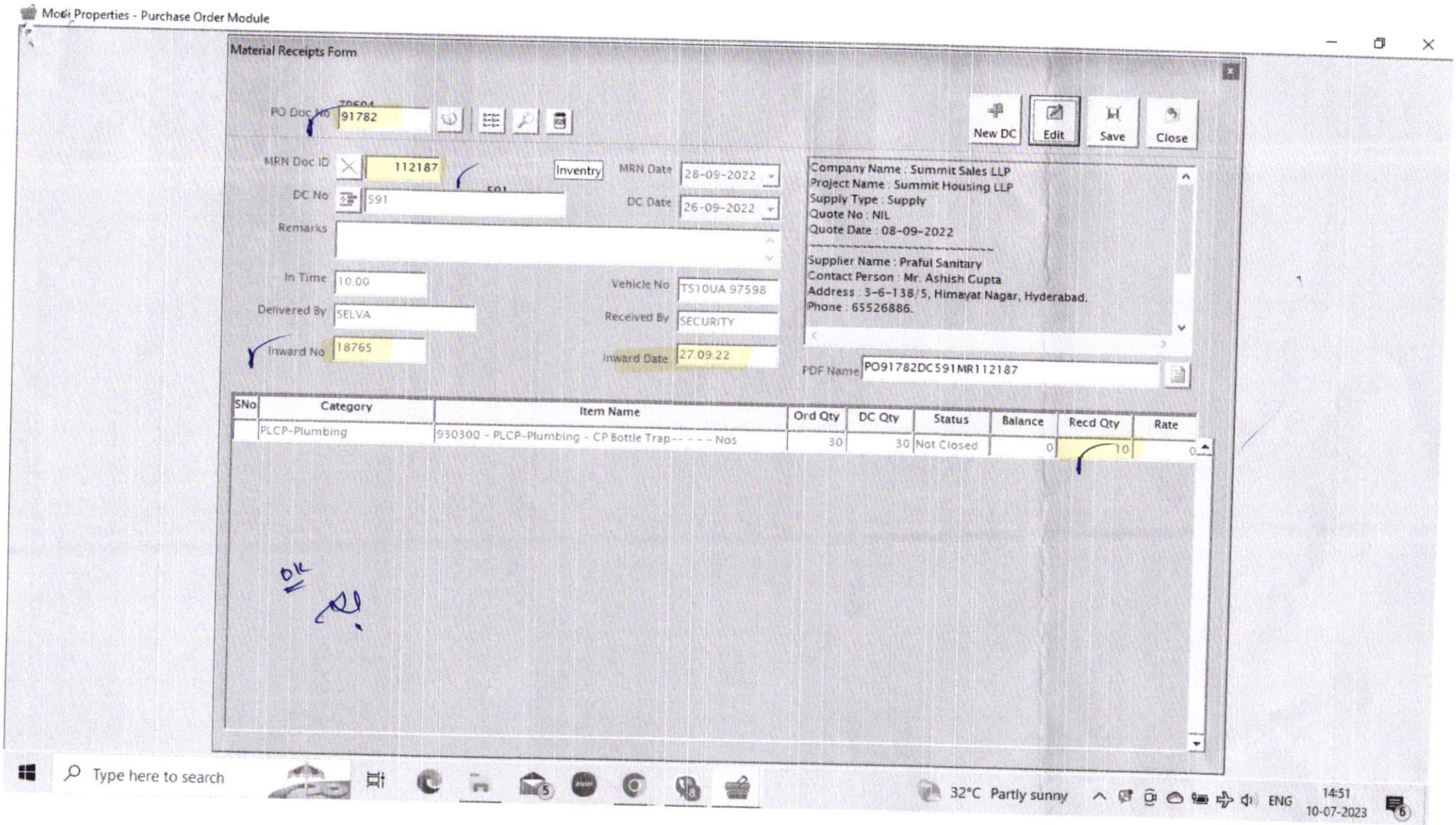
Authorised Signatory

Name : _____

Accepted the above Terms And Conditions

For ***Praful Sanitary***

Name : _____ Date : __/__/____


Modi Properties - Purchase Order Module
Material Receipts Form
PO Doc No 91782
MRN Doc ID 112187
Inventry
MRN Date 28-09-2022
DC No 591
DC Date 26-09-2022
Remarks
In Time 10.00
Vehicle No TS10UA 97598
Delivered By SELVA
Received By SECURITY
Inward No 18765
Inward Date 27.09.22
New DC
Edit
Save
Close
Company Name : Summit Sales LLP
Project Name : Summit Housing LLP
Supply Type : Supply
Quote No : NIL
Quote Date : 08-09-2022
Supplier Name : Praful Sanitary
Contact Person : Mr. Ashish Gupta
Address : 3-6-138/5, Himayat Nagar, Hyderabad.
Phone : 65526886.
PDF Name PO91782DC591MR112187
SNo
Category
Item Name
Ord Qty
DC Qty
Status
Balance
Recd Qty
Rate
PLCP-Plumbing
930300 - PLCP-Plumbing - CP Bottle Trap-- - - - Nos
30
30
Not Closed
0
10
0
OK
Type here to search
32°C Partly sunny
ENG
14:51
10-07-2023

GST INVOICE

(ORIGINAL FOR RECIPIENT)

Praful Sanitary
3-6-129/6, 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/ 591**	Dated **26-Sep-22**
Delivery Note **Invoice**	
Reference No. & Date.	Other References **Credit**
Buyer's Order No. **91782**	Dated **10-Sep-22**
Dispatch Doc No. **Invoice**	Delivery Note Date **26-Sep-22**
Dispatched through **Self**	Destination **Cherlapally**

Sl No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**CP Bottle Trap**	8481	18 %	**10 No:**	1,176.00	No:	35 %	**7,644.00**
	Output CGST							**687.96**
	Output SGST							**687.96**
	ROUNDING OFF							**0.08**
	Total			**10 No:**				**₹ 9,020.00**

Bill Not received
Lavanya

Amount Chargeable (in words) *E. & O.E*
Indian Rupees Nine Thousand Twenty Only

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
8481	7,644.00	9%	687.96	9%	687.96	1,375.92
Total	**7,644.00**		**687.96**		**687.96**	**1,375.92**

Tax Amount (in words) : **Indian Rupees One Thousand Three Hundred Seventy Five and Ninety Two paise Only**

Company's Bank Details
Bank Name : **Canara Bank**
A/c No. : **1181201020289**
Branch & IFS Code: **Banjara Hills & CNRB0001181**

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

PRAFUL SANITARY HIMAYATNAGAR HYDERABAD

"TRUE COPY"