terest calculation	on for delayed paymen	nts.				
oject Name	BRGV					
at no.	307					
ustomer Name	Prableen Bedi					
ooked by	Suresh					
repared by	KP					
ate	5-Sep-2024					
ign		0.4				
nterest rate	18.00	% p.a.				
	I I Down out	Remarks	Days	Principal	Interest	Balance
ate		Payment received	-	-	-	(25,000)
9-Feb-22		Booking amount	-	(25,000)	-	-
9-Feb-22	2,250		9	-	-	2,250
8-Feb-22		1st Installment	6	2,250	7	2,02,250
6-Mar-22	2,00,000	Payment received	8	2,02,250	798	(97,750)
4-Mar-22	(3,00,000)	2nd Installment	5	(97,750)	(241)	2,92,250
9-Mar-22	3,90,000		12	2,92,250	1,729	2,96,150
1-Mar-22			54	2,96,150	7,887	(2,95,450)
24-May-22	(5,91,600	Payment received 3rd Installment	37	(2,95,450)	(5,391)	(25,450)
30-Jun-22			215	(25,450)	(2,698)	(18,850)
31-Jan-23	6,600	GST	13	(18,850)	(121)	(6,78,850)
13-Feb-23	(6,60,000	Payment received	45	(6,78,850)	(15,065)	(18,850)
30-Mar-23		4th Installment	123	(18,850)	(1,143)	(11,330)
31-Jul-23	7,520	GST	19	(11,330)	(106)	(6,86,330)
19-Aug-23	(6,75,000	)) Payment received	52	(6,86,330)	(17,600)	(11,330)
10-Oct-23	6,75,000	5th Installment	113	(11,330)	(631)	(4,07,330
31-Jan-24	(3,96,000	)) Payment received	90	(4,07,330)	(18,079)	47,670
30-Apr-24	4,55,000	0 6th Installment	30	47,670	705	2,47,670
30-May-24	2,00,00	0 On completion	55	2,47,670	6,718	35,702
24-Jul-24	(2,11,96	8) Payment received	43	35,702	757	-
05-Sep-24	(35,70)	2) Payment received	43	33,702		
00 001			Approx Interest Payable		(42,475)	
			Approx interest rayaste		•	
Note:		2 + + + + + + + + + + + + + + + + + + +	d			
Column A, B	& C: Enter Installem	nts & payments receive	ants received	as negative amount	S.	
Column B: Et	nter receivables as pos	sitive amounts & paym	ents received	asg		
Cloumne D to	G: Do not change.					
C-st salumne	A R& C in accendi	ng order.				
Calculate sun	n of Installments / Pay	ments & Interest	/			
Culculare		/				
Charge	Interest of Rs.	(or) I	nterest waived	1		
Charge				ant discount	to Rs.	•
□ May c	on-time payment disco	ount (or) $\square$ R	educe on-time	e payment discount	to res.	
Allow C	m-time pay			G: A STATE OF M.F.		
Signature of	Manager:	4-1		Signature of M.D.		TO DY
	Wallager	XV		Date	APPRO	AED BA
Date	(1/)	3/1			170	
	16 8				4 9 5	EP 2024
	0.)			<b>N</b>	/ 103	la l
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