#### Nilgiri Estates

M G Road, Ranigunj Secunderabad

State Name: Telangana, Code: 36

#### Purchase Voucher

No. : PUR 10060 10061.

Ref.: PS/20-21/14 dt. 13-May-2020

Dated: 10-Jun-2020

Party's Name: SUP-Praful Sanitary

Particulars		
		Amount
Plumbing GST 18% Input CGST Input SGST OIE-Roundig Off	1,229.80 110.68 110.68 (-)0.16	₹ 1,451.00

### On Account of :

Being amount credited to Praful Sanitary towards purchase of plumbing material against invoice no: -PS/20-21/14 dt:-13.05.2020 po no:-66692 dt:-16.03.2020

mount (in words):

Indian Rupees One Thousand Four Hundred Fifty One Only

for SUP-Praful Sanitary

Prepared by: bhavani

Approved by

Receiver's Signature

# PURCHASE DIVISION Advice for approval for credit to supplier

Date: 26/05/2020				)	Prepared by:			MINISH.			
PO/WO no		6669			PO / WC	Date.	1	6/02/2020			
Supplier Na	ame	The second secon		uiday,	PO/WO	amount	,	16/03/2020.			
Firm/Comp	any	Ń	F	/ /	Project			13.1			
Sl. No.		Bill No.			Bill Date			Bill amount			
1.		PS/20	0-21/	14	13/05/2020			1451/-			
2.							/	,			
3.											
4.											
Amount A	– Bills tot	al(Excludin	g Transpor	t & Hamali Cl	narges):		1	451/-			
A. No.	DC No		I	OC. Date		MRN No.	D	C matches MRN			
<del>1.</del>						79085	6	Yes □ No			
2.								Yes □ No			
3.								Yes □ No			
Amount B –Other Credits:											
Amount C	Other De	ebits:						_			
Amount D	(D=A+B-	C) – Amou	nt to be cre	dited to the su	pplier:		1	,451/			
Amount E	– PO / WO	O value:			Ĉi-		,	11511-			
Amount F	– Differen	ce (A – E):									
Quantity re	ceived as	per PO/Wo	0		Yes □ Excess received □ Short received □ Other (explained below)						
Is difference	e between	PO / Bill a	acceptable?		r Yes □ No (explained below)						
Excess / sh	ort materi	al received			☐ Approved – within acceptable limits ☐ No (explained below)						
Close PO /	W?O										
Advance p	aid / PDC	given (ded	uct when p	aying)	□ Yes – Rs <u>. /-</u> 6 No						
Payment -	due date				29/05/2020.						
Remarks:	Bo	oull Va	elve	Brass	) 10,	t Phas	e - 1)	0			
					0						
Approve by		urchase Officer	Purcha: Manag	THE RESERVE OF THE PARTY OF THE	ement ager VED		counts – ceiver of bill	Accountant	Accounts Manager		
Sign:			1	SINA	56132	o Blo	luani	1. arde			
Date			26	MAINIBE	PARIKH		15/2021	28/5/2			

Notes: 1. In case amount to be credited to supplier and the bills total does not match prepare JV for debit or credit. 2. Attach additional sheets if quantity of bills or DCs is more than the space provided. Clearly mark the space provided with 'see attachment'. 3. Purchase Officer can approve Pos/Wos upto Rs. 5,000/-, Purchase Manager and Procurement Manager to approve all bills from 5,000/- to 1,00,000/- . 4. Attach JV, Office copy of PO/WO, DCs and bills to this advice. 5. In Amount A, exclude transport, Hamali charges, etc and instead include in Amount B. 6. To be approved by accounts manager if bill value exceeds Rs. 10,000/- 7. MD to approve all bills above 1,00,000/-

**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

Nilgiri Estates

5-4-187/3&4, IInd Floor, M.G. Road

Secunderabad

GSTIN/UIN 36AAHFN0766F1ZA : Telangana, Code : 36 State Name

Invoice No.	Dated
PS/20-21/ 14	13-May-2020
Delivery Note	•
Invoice	
Supplier's Ref.	Other Reference(s)
	Credit
Buyer's Order No.	Dated
66692	16-Mar-2020
Despatch Document No.	Delivery Note Date
Invoice	13-May-2020
Despatched through	Destination
Self	Rampally

SI No.	Description of Goods		HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
ı	40mm Brass Ball Valve	•,	8481	18 %	1 No:	1,892.00	No:	35 %	1,229.80
	Less:	Output CGST Output SGST ROUNDING OFF							110.68 110.68 (-)0.16
		7							×
	Inward 20085 Dr. 16 C	120		-					
	Rece Ashis	Q INMA Q INMA No.655 Q Dab.11-1	12 TO SON	13.			21		
		Total			1 No:				₹ 1,451.00

^mount Chargeable (in words)

E. & O.E

tian Rupees One Thousand Four Hundred Fifty One Only

HSN/SAC	Taxable	Central Tax		State Tax		Total	
	Value	Rate	Amount	Rate	Amount	Tax Amount	
8481	1,229.80	9%	110.68	9%	110.68	221.36	
Total	1,229.80		110.68		110.68	221.36	

Tax Amount (in words): Indian Rupees Two Hundred Twenty One and Thirty Six 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

18-03-2020 2:34:26 PM

From Company: Nilgiri Estates

5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003.

G S T No.: 36AAHFN0766F1ZA

12.03.20 2:07:22

Praful Sanitary			72734
3-6-138/5, Himayat Nagar, Hyderabad.		16-03-2020	
	Quote No	Nil	
40077300	<b>Quote Date</b>	16-03-202	20
9849624797	SupplyType	SupplyType Supply	
	40077300	Quote No 40077300 Quote Date	Quote No Nil 40077300 Quote Date 16-03-202

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 10149 - Plumbing - GI - Ball Valve - 1.5 In - nos	1.00	1,892.00	35.00	18.00	1,451.16
		Total Or	der Value	e	1,451.16

## Terms and Conditions :-

Specification / Brand All items shall be of Zoloto brand

**Payment Terms** 

After Delivery & Production of bill

Tax

Inclusive of all taxes

**Delivery Date** 

Next Day.

**Delivery Location** 

Nilgiri Estate

Sy.No.143/133/134/135/136, Rampally Village. 9030931172, 8297349480

Phone.

**Penality For Delay** 

**Transportation Cost** 

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. Above order for swimming pool purpose.

Completion Date

Nil

Measurment

Nil Nil

Security Remarks

For	Nilgiri	Estates

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary** 

Name:

Date : \_\_/\_\_/\_\_

Requisition Form

Com	pany Name:	mpany Name: NILGIRI ESTATES			m		14-03-2020		
	& Chase:	NILGIRI ESTAT		Date:					
		NILUIKI ESTAT.	E 	4,000,000,000,000,000			16:58		
Supp				Req. No.			72734		
Mate	erial required before date:			ID No.			56348		
No	De	scription		Size	Quantity	Units	Inward No	Date	
1	Brass Ball Valve		1,	1/2"	01	No's			
2		6669	V						
3		6							
4									
5									
6									
7									
8						A			
9									
i									
R	rks: - For Swimming Po	ol Purpose			8		1./	1	
Prepa	ared By	Suresh Kumar		Approved by			Suresh Kumar	DBY	
	& Date	14-03-2020		Sign. &			Suresh Kumar VED BY  16 MAR 2020  16 MAR 2020  16 MAR 2020		
Note	On receipt of material at	t site write inward num	ber and date i	n last 2 c	olumns.		1 6 MAR	A PASSION	

## Estimate/Draft PO

Page(s) 1 Of 1

16-03-2020 11:33:49 AM

Original / Office Copy / Purchase Div.Copy

From Company: Nilgiri Estates

5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003.

GSTNo.: 36AAHFN0766F1ZA

**Supplier Details** Praful Sanitary Doc No 66692 72734 3-6-138/5, Himayat Nagar, Hyderabad. **Doc Date** 16-03-2020 **Quote No** Nil GSTIN 36ACWPG864A1ZG 40077300 **Quote Date** 16-03-2020 65526886. 9849624797 SupplyType Supply

Kind Attn: Mr. Ashish Gupta

Estimate/Draft PO for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 10149 - Plumbing - GI - Ball Valve - 1.5 In - nos	1.00	1,892.00	35.00	18.00	1,451.16
		Total O	der Value	e	1,451.16

## Terms and Conditions :-

Specification / Brand All items shall be of Zoloto brand

**Payment Terms** 

After Delivery & Production of bill

Tax

Inclusive of all taxes

**Delivery Date** 

Next Day.

**Delivery Location** 

Nilgiri Estate

Sy.No.143/133/134/135/136, Rampally Village.

Phone. 9030931172, 8297349480

**Penality For Delay** 

**Transportation Cost** 

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. Above order for swimming pool purpose.

**Completion Date** 

Measurment

Nil Nil Nil

Security Remarks

Draft PO for Approval

For Nilgiri Estates

Authorised Signatory

Name :

Accepted the above Terms And Conditions

APPROVED BY

For Praful Sanitary

Name:

Date : \_\_/\_\_/\_