PURCHASE DIVISION

Advice for approval for credit to supplier

Date:	30/7/20	Prepared by:	Sowmya.
PO/WO no.	68986.	PO / WO Date.	23/7/20
Supplier Name	Praful Sanitary	PO/WO amount	28,839
Firm/Company	SSllp	Project	SSllp.
Sl. No.	Bill No.	Bill Date	Bill amount
1.	PS/20-21/245	27/7/20.	28,839
2.			
3.			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			28,839.

Sl. No.	DC No	DC. Date	MRN No.	DC matches MRN
1.			81509	☑ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No
4.				☐ Yes ☐ No

Amount B –Other Credits :_	
Amount C –Other Debits :_	
Amount D (D=A+B-C) – Amount to be credited to the supplier:	28,839.
Amount E – PO / WO value:	28,839.
Amount F – Difference (A – E):	

Quantity received as per PO /WO	☑ Yes ☐ Excess received ☐ Short received ☐ Other (explained below)
Is difference between PO / Bill acceptable?	☑ Yes ☐ No (explained below)
Excess / short material received	☑ Approved – within acceptable limits ☐ No (explained below)
Close PO / W?O	☑ Yes ☐ No – wait for balance material ☐ No (explained below)
Advance paid / PDC given (deduct when paying)	☐ Yes – Rs._____/- ☑ No
Payment – due date	**1.8.2020**
Remarks:_	

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	Sowmya						
Date	30/7/20						

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/-

GST INVOICE

(ORIGINAL FOR RECIPIENT)

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	Invoice No. **PS/20-21/ 245**	Dated **27-Jul-2020**
	Delivery Note **Invoice**	
	Supplier's Ref.	Other Reference(s) **Credit**
Buyer **Summit Sales LLP** 5-4-187/3&4, IInd Floor, M.G Road Secunderabad GSTIN/UIN : 36ACQFS2044C1Z7 State Name : Telangana, Code : 36	Buyer's Order No. **68986**	Dated **23-Jul-2020**
	Despatch Document No. **Invoice**	Delivery Note Date **27-Jul-2020**
	Despatched through **Self**	Destination **Cherlapally**

Sl No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**CP Flange**	8481	18 %	**100 No:**	10.00	No:	10 %	**900.00**
2	**25mm Extension Nipple**	8481	18 %	**90 No:**	60.00	No:	25 %	**4,050.00**
3	**Waste Coupling Half Thread**	8481	18 %	**24 No:**	275.00	No:	35 %	**4,290.00**
4	**Teflon Tape**	3919	18 %	**500 No:**	20.00	No:	20 %	**8,000.00**
5	**450mm Pvc Connection**	3917	18 %	**60 No:**	70.00	No:	20 %	**3,360.00**
6	**600mm Pvc Connection**	3917	18 %	**60 No:**	80.00	No:	20 %	**3,840.00**
								24,440.00
	Output CGST							**2,199.60**
	Output SGST							**2,199.60**
	Less : ***ROUNDING OFF***							**(-)0.20**
	Total			**834 No:**				**₹ 28,839.00**

Amount Chargeable (in words) *E. & O.E*

Indian Rupees Twenty Eight Thousand Eight Hundred Thirty Nine Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
8481	9,240.00	9%	831.60	9%	831.60	1,663.20
3919	8,000.00	9%	720.00	9%	720.00	1,440.00
3917	7,200.00	9%	648.00	9%	648.00	1,296.00
Total	**24,440.00**		**2,199.60**		**2,199.60**	**4,399.20**

Tax Amount (in words) : **Indian Rupees Four Thousand Three Hundred Ninety Nine and Twenty paise Only**

PRAFUL SANITARY HIMAYATNAGAR HYDERABAD

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

INWARD	
Inward No: 14629	Dt: 27/7/20
MRN No: 81509	Dt: 28/7/20
Received By:	Sign:
SUMMIT SALES LLP	

Certified by:

Stores Manager

MODI PROPERTIES PVT. LTD. SEC'BAD
INWARD
No. 67932
Date 31/7
Sign.

Purchase Order

 23-07-2020 4:34:38 PM

68986
21.07.20 2:16:56

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**	68986	14727
3-6-138/5, Himayat Nagar, Hyderabad.	**Doc Date**	21-07-2020	
	Quote No	Nil	
GSTIN 36ACWPG864A1ZG 40077300	**Quote Date**	08-07-2020	
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	7029 - Plumbing - CP - Flanges - NA - nos	100.00	10.00	10.00	18.00	1,062.00
2	7026 - Plumbing - CP - Extension Nipple - 1/2 In - nos 1"	90.00	60.00	25.00	18.00	4,779.00
3	7047 - Plumbing - CP - Waste coupling - 1/2 thread - nos	24.00	275.00	35.00	18.00	5,062.20
4	6040 - Miscellaneous - Tefflon tape - NA - nos	500.00	20.00	20.00	18.00	9,440.00
5	10048 - Plumbing - PVC - PVC Connection - 18 in - nos	60.00	70.00	20.00	18.00	3,964.80
6	7327 - Plumbing - PVC - Connection - 2 ft - nos	60.00	80.00	20.00	18.00	4,531.20
					Total Order Value . . .	**28,839.20**

Rupees : Twenty Eight Thousand Eight Hundred Thirty Nine and Paise Twenty Only.

Terms and Conditions :-

Specification / Brand	As per details given in the quotation.
Payment Terms	Within 30 days of delivery.
Tax	All taxes included in above price.
Delivery Date	Within 3 days
Delivery Location	Summit Housing LLP Cherlapally,Behind Kingston PG college, Hyderabad Phone. 9618244433, Hamendra,9502266233, Mahesh.
Penality For Delay	Nil
Transportation Cost	Included by us !
Warranty	7 years warranty
Advance Paid	Nil
Other Terms	We reserve the right to reject items not conforming to quality and specifications. Above order for Stock purpose.
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	

For ***Summit Sales LLP***

Authorised Signatory

Name : ____________

Accepted the above Terms And Conditions

For ***Praful Sanitary***

Name : ____________

Date : __/__/____

Requisition Form

Company Name:	SSLLP	Date:	20.7.2020
Site & Phase :	SHLLP	Time:	15.00
Supplier		Req. No.	14727
Material required before date:		ID No.	58621

No	Description	Size	Quantity	Units	Inward No	Date
1	CP WALL MIXTURE		30	NOS		
2	LONG BODY		15	NOS		
3	SHORT BODY		16	NOS		
4	SHOWER ARM		20	NOS		
5	SHOWER HEAD 68985		20	NOS		
6	PILLAR COCK		20	NOS		
7	ANGLE COCK		60	NOS		
8	EXTENSION NIPPAL	1/2"X1"	90	NOS		
9	WASH BASIN WASTE COUPLING		24	NOS		
10	HEALTH FAUCET		20	NOS		
11	CP FLANGES		100	NOS		
12	PVC CONNECTION 68986	2'	60	NOS		
13	PVC CONNECTION	18"	60	NOS		
14	WASTE PIPE		60	NOS		
15	TEFLON TAPE		500	NOS		

Remarks: FOR STOCK MAINTENANCE AT SSLLP

Prepared By	SOWMYA	Approved by	APPROVED BY 22 JUL 2020 SOHAM MODI MANAGING DIRECTOR
Sign.& Date	20.07.2020	Sign. & Date	

Note: On receipt of material at site write inward number and date in last 2 columns.