# PURCHASE DIVISION Advice for approval for credit to supplier

Date:		24/5	08/20		P	repared	by:		1. 10		
PO/WO no	).	1			P	PO / WO Date.			Kerthi		
Supplier N	ame	695			1 P	PO/WO amount			12/08/20		
Firm/Comp	oany	Gi.P		Om ma	tenals P	roject			5570		
Sl. No. Bill No.		te	Bill Date				Nilgiri Estate				
1.		Dili 1402						****	Bill amount		
		149			1	210	8/20		55.70 1-		
2.									1		
3.											
4.								Wi .		t	
Amount A	– Bills tot	al(Excludi	ing Transport	& Hamali C	harges)	):			5\$20 1	~	
Sl. No.	DC No		DO	C. Date			MRN No	).	DC matches MR		
1.	149			12/08/2	Ω		8201	48	yes □ No		
2.									□ Yes □ No		
3.									□ Yes □ No		
Amount B	-Other Cre	edits :									
Amount C	Other De	bits:			a	-			. –		
Amount D	(D=A+B-0	C) – Amou	ınt to be credi	ted to the su	pplier:				55.70  -		
Amount E -	- PO / WC	value:									
Amount F -	- Difference	e (A – E)	:						55701-	V (802) (802) (300) (800)	
Quantity red	ceived as p	per PO/W	O		y Yes	s 🗆 Exc	ess receive	ed   Short re	ceived  Other (exp	lained below)	
Is difference	e between	PO / Bill	acceptable?		□-Yes □ No (explained below)						
Excess / sho	ort materia	l received			□ Apr	proved.	- within a	cceptable lim	its   No (explained	below)	
Close PO /	W?O				d Yes	s □ No -	wait for	balance mate	rial   No (explained	d below)	
Advance pa	id / PDC g	given (ded	uct when pay	ing)	□ Yes	s – Rs <u>.</u>	/- / No	)			
Payment - c	due date				3	100	1-0				
Remarks:		-			3	108	20	SKY W STREET,	Management of the Control of the Con	-	
									THE RESERVE OF THE PROPERTY OF THE PERSON OF		
Approved	i Pu	rchase	Purchase	Procure	ement	I	ИD	Accounts	- Accountant	Accounts	
by		fficer	Manager	Mana	ager			receiver o	f	Manager	
Sign:	Kus	DA:	DA	-				OIII			
Date		108/40	28/8								

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/-

#### Tax Invoice

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( = )	
	1

**G.P. BUILDCON MATERIALS** 

G-1, Sai Srinivasa Towers, 29 - Sripuri Colony Kakaguda, Secunderabad - 15 GSTIN/UIN: 36AIZPG8119P1Z9

State Name: Telangana, Code: 36 Contact: 9866116375,9490056802

E-Mail: g.pbuildcon999@gmail.com

Buyer

M/S.NILAGIRI ESTATES

5-4-187/3 & 4,2nd FLOOR,M.G.ROAD

SECUNDERABAD

GSTIN/UIN

: 36AAHFNO766FIZA

State Name

: Telangana, Code : 36

Invoice No.	Dated	
GP/20-21/149	12-Aug-2020	
Delivery Note		
Buyer's Order No.	Dated	
69566	12-Aug-2020	
Despatch Document No.	Delivery Note Date	
Despatched through	Destination	-
Direct	Cherlappaly	- 1

GBH 200 Slno: 026010543 CGST @ 9 %	84672100	1 NOS	4,720.00	NOS	4,720.00
CGST @ 9 %					
CGST @ 9 % SGST @ 9 % ROUNDF	9	7	9	% %	424.80 424.80 0.40
	Ode idos	685HS 26 8			
		8 E C 3 A	·		

Amount Chargeable (in words)

INR Five Thousand Five Hundred Seventy Only

State Tax Total Central Tax Taxable HSN/SAC Tax Amount Amount Rate Amount Value Rate 849.60 424.80 4,720.00 424.80 9% 84672100 424.80 849.60 4,720.00 424.80 Total

INR Eight Hundred Porty Nine and Sixty paise Only

Siga

Company's PANSITE Lateres : AIZPG8119P

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct. Company's Bank Details

: ICICI BANK LTD Bank Name

630805500095 A/c No.

Branch & IFS Code: VIKRAMPURI & IC

for G.P

E. & O.E

SUBJECT TO SECUNDERABAD JURISDICTION

### **Purchase Order**

Page(s) 1 Of 1

12-08-2020 12:48:46 PM

11.08.20 11:32:21

From Company :

**Nilgiri Estates** 

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

G S T No.: 36AAHFN0766F1ZA

Supplier Details				
G.P.Buildcon materials	Doc No	69566	72914	
flat.no.G1, Saisrinivasa towers, Sri puri Colony, Kakaduda, secunderbad	Doc Date	12-08-2020		
	Quote No	NIL 12-08-2020		
	<b>Quote Date</b>			
	SupplyType	upplyType Supply		

#### Kind Attn: Mr.Pavan

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST%	Amount
1 5028 - Equipment - machinery - Hammering Machine - other - nos GBH-200	1.00	4,720.00	0.00	18.00	5,569.60
		Total O	der Valu	e	5,569.60

## Terms and Conditions :-

Specification / Brand Item shall be of 'bosch Drilling machine with with drill bits

**Payment Terms** 

After Delivery & Production of bill

Tax

All taxes included in above price.

**Delivery Date** 

Same Day

**Delivery Location** 

Nilgiri Homes Phase - II

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

Phone. Mallesham 9553797190

Penality For Delay

Nil

**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 Site work Purpose.

**Completion Date** 

Nil

Measurment

Nil

Security Remarks Nil Nil

For Nilgiri Estates Authorised Signatory Accepted the above Terms And Conditions

For G.P.Buildcon materials

Name : \_

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

Contact - -

Requisition Form NILGIRI ESTATES Date: 07.08,2020 Company Name: 09:40 NILGIRI ESTATE Time: Site & Phase: 72914 Req. No. Supplier ID No. 59037 Material required before date: Inward No Date Units Description Size Quantity No Drilling Machine (Hammer machine GBH200) STD 01 No's 1 2 3 4 5 6 7 2020 8 9 Remarks: - for our company department electrician site use purpose. Earliear machine was not working ROVET

Prepared By

Anil Yadav

Approved by

Viiav 10 Prepared By Sign. & Date 07.08.2020 Sign.& Date Note: On receipt of material at site write inward number and date in last 2 columns Date: Company Name:

Company Ivame.	1						
Site & Phase :  Supplier  Material required before date:  Urgent			Time	:			
			Req.	No.			
		Urgent	ID N	0.			Date
No Description			Size	Quantity	Units	Inward No	
1							
2							
4							
Ŝ	4						
6							
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8							
9							
10							
Remarks:							
Prepared By				roved by			
Sign.& Date			Sign	. & Date			

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