PURCHASE DIVISION

Advice for approval for credit to supplier.

Date:	100	28 09	120	2	Prepare	l by:	TOTO was said	Kevelli.	THETHANGE		
PO/WO no.		70141	2		PO/W	PO / WO Date.		5/09/20			
Supplier Na				1	PO/WO amount			10,272/-			
Firm/Comp	any		·	ILP	Project		e al igniciona		Date of the Control o		
Sl. No.	No. Bill No. 36.3			LLP	Bill Dat	e	: E	Sill amount	The second state of the se		
1,		21.0			16/09/20			10,272/	and the second s		
2.		363			1010	1120	distance of the second state of the second sta	1017-12			
3.								•			
4.					V						
Amount A	- Bills tot	al(Excluding T	ransport & Ha	amali Cha	rges):	1	II. Company	10,242/-			
SL No.	1		DC. Da	DC. Date		MRN No.	I	C matches MRN			
1-	1. 262		1/-	09/20		831:	10 9	Yes 🗆 No			
2.	2. 363		101	01100		031-	[Yes 🗆 No			
3.			To white the			and the state of t	. [Yes 🗆 No '	ANNA		
4.								Yes 🗆 No			
Amount B	-Other Cr	redits:				Ī	-				
Amount C	Other De	ebits:									
Amount D	(D=A+B-	C) – Amount t	to be credited t	to the supp	olier:			10,2421			
Amount E						ı		10,272/-			
		nce (A – E):						10) 24-1	3		
		per PO/WO			Yes 🗆 E	cess receive	d □ Short reco	eived Other (expla	ined below)		
		n PO / Bill acc	eptable?		□-Yes □ No (explained below)						
		ial received			☐ Approved – within acceptable limits ☐ No (explained below)						
Close PO					✓ Yes □ No – wait for balance material □ No (explained below)						
2		given (deduct	when paving)	/	☐ Yes – Rs. /- 1 No						
Payment -		given (dedder	when puj mg/								
					5/10/20						
Remarks:											
			and the same of th		·			*			
	n 6 a	hundhaga	Purchase	Procure	ment	M D	Accounts -	Accountant	Accounts		
Approv by	- B	Officer	Manager	Mana			receiver of	f	Manager		
Sign:	There were the second	0									
Date	Ke	etti									
Date	Physician	28/09		1 41	hills total	loes not mate	h prepare JV	for debit or credit. 2	. Attach		

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 attachment'. 3. Purchase Officer can approve Pos/Wos upto Rs. 5,000/-, Purchase Manager and Procurement Manager to approve attachment'. 3. Purchase Officer can approve Pos/Wos upto Rs. 5,000/-, DCs and bills to this advice. 5. In Amount A, exclude all bills from 5,000/- to 1,00,000/-. 4. Attach JV, Office copy of PO/WO, DCs and bills to this advice. 5.

GST INVOICE

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
Buver

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

36AANFG4817C1ZH

: Telangana, Code : 36

Villa Orchids LLP

Secunderabad.

GSTIN/UIN

State Name

CWPG4864A1ZG langana, Code : 36 hitary@gmail.com Delivery Note
Invoice
Supplier's Ref.

PS/20-21/ 363

Invoice No.

Dated 16-Sep-2020

lice olier's Ref. Otl

Other Reference(s)

Credit

Buyer's Order No. Dated 70141 5-Sep

5-Sep-2020 Delivery Note Date

Invoice
Despatched through

16-Sep-2020 Destination

Self

12 No:

Despatch Document No.

Kowkur

SI Vo.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	315 Left Hand 90* Junction Chamber	3917	18 %	12 No:	1,170.00	No:	38 %	8,704.80
	Output CGST Output SGST ROUNDING OFF							783.43 783.43 0.34
		1	er S					
	INWARD INWARD	0 20						
	Inward No: 15327 [DI] 91 MRN No: 83179 Sight	1						
	Received B.	LLP	1					

Amount Chargeable (in words)

Indian Rupees Ten Thousand Two Hundred Seventy Two Only

State Tax Total Taxable Central Tax HSN/SAC Amount Tax Amount Rate Value Rate Amount 783.43 1,566.86 783.43 8,704.80 9% 9% 3917 783.43 1,566.86 Total 8,704.80 783.43

Total

Tax Amount (in words): Indian Rupees One Thousand Five Hundred Sixty Six and Eighty Six paise Only

for Praful Sanitary

₹ 10,272.00

E. & O.E

Company's PAN

ACWPG4884A

Declaration

We declare that this invoice shows the actual price of the goods

described and that all particulars are true and correct.

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice



Page(s) 1 Of 1

07-09-2020 2:02:51 PM



03.09.20 11:50:23

From Company: Villa Orchids LLP

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

G S T No.: 36AANFG4817C1ZH

Supplier Details				
Praful Sanitary	Doc No	70141	63508	
3-6-138/5, Himayat Nagar, Hyde	Doc Date	05-09-2020		
		Quote No	Nil	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	05-09-202	20
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 10116 - Plumbing - PVC - Eco Chamber L T - 110 mm - nos MUCUBL315G	12.00	1,170.00	38.00	18.00	10,271.66
		Total O	rder Valu	e	10,271.66

Terms and Conditions :-

Specification / Brand

All items shall be of 'Supreme' brand.

Payment Terms

Within 30 days of delivery.

Tax

Inclusive of all taxes

Delivery Date

Within 7 days

Delivery Location

Villas Orchids

Behind: Janapriya, Kowkur.

Phone. 9502232100/9502266233

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 Villas water supply connection purpose.

Completion Date

Nil

Measurment

Nil

Security

Nil

Remarks

Accepted the above Terms And Conditions

For Praful Sanitary

For Villa Orchids LLP

Authorised Signatory

10

Name:	

Date : __/__/___

Requisition Form

4			1100	tion i omi			04 00 0000		
Comp	oany Name:	VOC LLP	Date:				04 -09-2020		
	Phase:	VOC		Time:			15.40		
Suppl				Req. No.			63508		
Mater	rial required before :	06-09-2020		ID No.			59611		
No	Desc	ription	5	Size	Quantity	Units	Inward No	Date	
1	ECO DRAIN BEND CH	HAMBER	4"(i	nches)	12	Nos			
		12,				3			
		30,100,							
\cup									
			2						
						1	W		
Rem	arks: For VOC villa wa	ter supply connection &	drain line co	onnection wo	ork purpose		EDBY		
Prepa	ared By	A Suresh		Approved	by	APP	SEP 2020		
	.& Date	04-09-2020		Sign. & D	ate	1	SEP 2020		
				,		1 0	SEP 2020 SOHAM MODI HAGING DIRECTOR	7	
						1	NAGING DI		

Page(s) 1 Of 1

05-09-2020 2:45:34 PM

Original / Office Copy / Purchase Div.Copy

From Company: Villa Orchids LLP

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

GSTNo.: 36AANFG4817C1ZH

Supplier Details					
Praful Sanitary	Doc No	70141	63508		
3-6-138/5, Himayat Nagar, Hyd	Doc Date	Doc Date 05-09-2020 Quote No Nil			
	Quote No				
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	05-09-2020		
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 10116 - Plumbing - PVC - Eco Chamber L T - 110 mm - nos MUCUBL315G	12.00	1,170.00	38.00	18.00	10,271.66
	Total Order Value				

Terms and Conditions :-

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Tax

Inclusive of all taxes

Delivery Date

Within 7 days

Delivery Location

Villas Orchids

Behind: Janapriya, Kowkur.

Phone. 9502232100/9502266233

Penality For Delay

Transportation Cost

Transport cost shall be borne by us.

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Advance Paid

Nil

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Above order for Villas water supply connection purpose.

Completion Date

Nil

Measurment

Nil Nil

Security Remarks

1. Shasky

For Villa Orchids LLP

Authorised Signatory

Accepted the above Terms And Conditions

APPROVED BY

05 SEP 2000

SOHAM MODIT

For **Praful Sanitary**

Name :	Name :	 Date:	/_	J