# PURCHASE DIVISION Advice for approval for credit to supplier

Date:		29/10/2020	y Sun	Prepared	by:		T.D. Murthy			
PO/WO no	).	71310		PO / WO	PO / WO Date.		15/10/2020			
Supplier N	ame	Ganesh Tube Trad	lers	PO/WO amount			Rs. 36,285/-			
PO/WO no.  Supplier Name  Firm/Company  Sl. No.  1.  2.  3.  4.  Amount A – Bills to  Sl. No. DC No  1. 305  2  3.  4.  Amount B – Other C  Amount C – Other D  Amount D (D=A+B  Amount E – PO / W  Amount F – Difference  Quantity received as  Is difference betwee  Excess / short mater  Close PO / W?O		Summit Sales LLF	Project			SHLLP				
Sl. No.		Bill No.	Bill Date	;		Bill amount				
1.		305		17/10/20	20		Rs. 36,285/-			
2.		-	N.	-			- ,			
3.		-		-			•			
4.							-	/		
Amount A	– Bills tot	al(Excluding Transp	port & Hamali Ch	narges):			Rs. 36,285/-			
Sl. No.	DC No		DC. Date		MRN No.		DC matches MRN			
1.	305		17/10/2020		84211					
2.	-		-		-		□ Yes □ No			
3.							□ Yes □ No			
4.							□ Yes □ No			
Amount B	-Other Cı	redits :	I				-			
Amount C	-Other D	ebits:					-			
Amount D	(D=A+B-	·C) – Amount to be	credited to the su	pplier:			Rs. 36,285/-			
Amount E	– PO / W	O value:					Rs. 36,285/-			
Amount F	– Differen	nce (A – E):					•			
Quantity re	eceived as	per PO /WO		₽ Yes □ Exc	cess receive	d □ Short re	ceived   Other (expl	ained below)		
Is different	ce between	n PO / Bill acceptab	le?	Yes □ No (explained below)						
Excess / sh	nort materi	al received								
Close PO	W?O			Yes □ No – wait for balance material □ No (explained below)						
Advance p	aid / PDC	given (deduct wher	n paying)	□ Yes – Rs.	/-en	No				
Payment -	due date			31/10/2020						
Remarks:			\							
				λ						
Approv			chase Process		MD	Accounts receiver of bill	22	Accounts Manager		
Sign:		all De	29	OCT 2020						
Date	1	29/10/20	MANAGER	PROCUREME	NT		IV for debit or credi	1 2 A#==1		

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/-



E. & O.E





Invoice No. 305 Ref. No. 71310

# **TAX INVOICE**

Party: SUMMIT SALES LLP

5-4-187/3&4, 2 Nd Floor, Mg Road,

Secunderabad

GSTIN/UIN : 36ACQFS2044C1Z7 State Name : Telangana Code : 36

SI No.	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1 2 3	ARALDITE 500GMS J PASTE WALL PUTTY 20KG	3506 3506 3214	18 % 18 % 18 %	30 NO 30 NO 20 NO	550.00 55.00 630.00	NO NO		16,500.00 1,650.00 12,600.00
		65					-	30,750.00
		CGST SGST		T				2,767.5 2,767.5
	RERTIES OF INWARD OF INVARION							
	SECBAL			-5				
	INWARD Inward No: \$5086 Dt: 20 MRN No: 84211 Dt: 2111	10 20	C	ertifiec by	Jan de la company de la compan	*		
	Received By: Sign: SUMMIT SALES LLP	4	Stor	es Manas				
-	THE REAL PROPERTY OF THE PROPE	Total	204	80 NO	/			₹ 36,285.0

Amount Chargeable (in words)

INR Thirty Six Thousand Two Hundred Eighty Five Only

HSN/SAC	Taxable	Central Tax		State Tax		Total	
	Value	Rate	Amount	Rate	Amount	Tax Amount	
3506	18,150.00	9%	1,633.50	9%	1,633.50	3,267.00	
3214	12,600.00	9%	1,134.00	9%	1,134.00	2,268.00	
Total	30,750.00		2,767.50		2,767.50	5,535.00	

Tax Amount (in words): INR Five Thousand Five Hundred Thirty Five Only

Company's PAN

: ADBPJ8881C

Company's Bank Details

Bank Name : HDFC CA 50200014835551

A/c No. : 5

: 50200014835551

Branch & IFS Code: PG ROAD, SEC-BAD & HDFC0000004

for GANESH TUBE TRAIL

Declaration

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

REVERSE CHARGE: NO



H.No.5-2-270, Plot No.29, Hyderbasti, (Back side of Old Traffic P.S.) Secunderabad - 500 003. Ph: 040-66568587, 66568581 Email: ganeshtubetraders@gmail.com www.ganeshtubetraders.com

# **Purchase Order**

Page(s) 1 Of 1

15-10-2020 14:48:55



From Company: Summit Sales LLP

5-4-187/3&4,II nd floor,MG Road, Secunderabad-500003.

G S T No.: 36ACQFS2044C1Z7

10.10.20 12:34:48

Supplier Details					
Ganesh Tube Traders		Doc No	71310	168044	
5-1-373/11, old Ghasmandi	Doc Date	15-10-2020			
			Quote No	Nil	
GSTIN 36ADBPJ8881C1ZJ		66568587/ 66384751	<b>Quote Date</b>	15-10-202	20
9246330441.	9949248666		SupplyType	Supply	

#### Kind Attn: Sandeep Jain

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 7109 - Plumbing - other - Araldite - other - gms	30.00	550.00	0.00	18.00	19,470.00
2 6548 - Paints - Janata Paste - NA - kgs	30.00	55.00	0.00	18.00	1,947.00
3 6601 - Paints - Wall Care Putti - 20kgs - bags	20.00	630.00	0.00	18.00	14,868.00
		Total Or	der Value	e	36,285.00

### Terms and Conditions :-

Specification /

As per details given in the quotation.

**Payment Terms** 

After Delivery & Production of bill

Tax

All taxes included in above price.

**Delivery Date** 

Next Day.

**Delivery Location** 

Summit Housing LLP

Cherlapally, Behind Kingston PG college, Hyderabad

Phone. 9618244433, Hamendra, 9502266233, Mahesh.

Penality For Delay

Transportation

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. Final payment as per actual weighment.

Above order for Stock maintaince purpose.

**Completion Date** Measurment

Nil

Security

Nil

Remarks

For Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions

For Ganesh Tube Traders

Name :

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

Requisition Form

				Requisi	tion Fo	orm				
Company Name: SSLLP				•	Date:		13.10.20			
Site & Phase : SHLLP				Time:				14.00		
Supp	plier				Req. N	Vo.		168044		
	erial required before date:				ID No			60729		
No	Descr	iption		Size	ze Quantity		Units	Inward No	Date	
1	WALL CARE PUTTY					20	BAGS			
2	JANTA PASTE			500 G	iΜ	30	NOS			
3	ARALDITE			500 G	iΜ	30	NOS			
4										
5										
6			2.0. 413	10						
7		(	5.0.							
8										
10										
11										
12										
13										
Rei	 marks: FOR STOCK AND	SITE								
Prepared By HEMENDRA		ORA	Approved by							
Sign	.& Date	13.10.20	20		Sign. & Date					
					2 3341 3355	12				

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