PURCHASE DIVISION Advice for approval for credit to supplier

Date:		28-11-20				Pr	epared	by:			Prabhak	ar.P	
PO/WO no. 72250		<u> </u>		PO / WO Date.			18-11-20						
Supplier Na	ame	Praful Sani	tary			PO/WO amount			5,326.42				
Firm/Company Nilgiri Estates				Project				<u> </u>	NE				
Sl. No.	- 	Bill No.				Bi	ill Date			Bill an	ount		
1		PS/20-21/5	51			19	9-11-20					5,326-00	
2				·		_						1	
3						+				<u>. </u>		/_	
4						<u> </u>					·		
Amount A	– Bills t	otal(Excludi	ing Transp	ort & H	amali Cha	rges)	<u> </u>	<u>.</u>		ļ		5,326-00	
Sl. No.	DC .N			DC. Da				MRN 1	No.	DC má	îtches M	-	
1.	 -				. <u> </u>			85385		Yes	□ No		
2.										□ Yes	□ No		
3.			- <u></u>					<u> </u>			□ No		
Amount B -Other Credits: Transportation charges							 .			10105			
Amount C						·	 .			 	-		
Amount D	(D=A+)	B-C) – Amo	unt to be	redited 1	to the sup	olier:						5 226 00	
Amount E						·						5,326-00	
Amount F	– Differ	ence (A – E)	: GST-18	%		_						5,326-42	
Quantity re	ceived :	as per PO /W	/O		,	□ Ex	cess re	ceived n	Short receive	d r. Othe	r (ovnloi	mod hotan)	
Is difference	e betwe	en PO / Bill	acceptabl	e?							r (expiai	ned below)	
		erial received		<u> </u>	i	☐ Yes ☐ No (explained below) ☐ Approvedwithin acceptable limits ☐ No (explained below)							
Close PO /	W?O				į.				nce material				
Advance pa	aid / PD	C given (dec	luct when	paying)	□ Yes			l No			named 6	elow)	
Payment -	due date	9			07-11-						_		
Remarks:									· · - · - · - · - · - · - · - · - · - ·				
			<u></u> .										
Approve	d	Purchase	Purch	ase	Procurem	ent	T N	1D	Accounts -				
by		Officer	Mana		Manage		,		receiver of	Acco	untant	Accounts Manager	
Sign:			17.4	7	•				bill				
Date			28 11	0			-			 	<u> </u>		
otes: 1 In a	000 0						1			1		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. 10,000/-, Purchase Manager or Procurement Manager to approve all bills from 10,000/- 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/-

Pr	aful Sanitary		Invoi	ce No.		Date	od	
3-	6-429/6,SRI SAI TOWER,		- 1	20-21/ 551			eu Nov-20:	20
	No.4 HIMAYAT NAGAR		Deliv	ery Note		1.5-	1400-20	20
	/DERABAD STIN/UIN: 36ACWPG4864A1ZG		Invo	ice				
	ate Name : Telangana, Code : 36			lier's Ref.		Oth	er Refere	ence(s)
	Mail: prafulsanitary@gmail.com		'''			1 .	dit	300(0)
Βu	yer		Buve	r's Order N	0.	Dat		
	lgiri Estates		722			1	Nov-20:	20
	4-187/3&4, IInd Floor, M.G. Road			oatch Docu	nent No		very Not	
	ecunderabad		Invo				Nov-20:	
	STIN/UIN : 36AAHFN0766F1ZA			patched thre	ough		stination	20
St	ate Name : Telangana, Code : 36		Self		Jug.,	3		
			3611			Rai	mpally	
SI	Description of	LUCAUCAC	1 00=			- ₁		
No.		HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	50mm Pvc Tee	3917	18 %	CN	45.00	N	45.00	
2	40x150mm G I Nipple	7307	18 %		45.99 94.90		1	151.77
3	40mm Non Return Valve	8481	18 %	12 No: 3 No:	1,799.00		1	854.10
-		0401	10 /8	3 140:	1,799.00	1110.	35 %	3,508.05
			ł					4,513.92
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	MRN No: 85385 Dt: 70 MRN No: 85385 Sign	¥				. À	Valor.	Ì
1	Received By:	ľ			<i>\}_\\\</i>	The		•
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	Nilgiri Estates	* **	Ì		1	The Second		
	The state of the s	İ						
	. Tota	1	 	21 No:	 	+	-	# F 226 00
:	mount Chargeable (in words)			1	1			₹ 5,326.00 E. & O.E
lr	idian Rupees Five Thousand Three Hundred Twenty Six	Only						2. 4 0.2
	HSN/SAC	Ta	xable	Central	Тах	St	ate Tax	Total
2	917		alue			≀ate	Amour	nt Tax Amoun
	307		151.77	9%	13.66	9%	13	.66 27.32
	481		854.10 508.05	9%	76.87	9%		.87 153.74
9	9	0,.	308.03	9% 9%	315.72	9% 9%	315	.72 631.44
-		Total 4,	513.92		406.25	076	406	.25 812.50
Ta	ax Amount (in words): Indian Rupees Eight Hundred Twelve a	nd Fifty n	aice O	nlv				
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1_	and the BAN						M.	
	company's PAN : ACWPG4864A						*\\ •	or Praful Sanitary
	eclaration						•	or i reier oamtary
4	Ve declare that this invoice shows the actual price of the goods escribed and that all particulars are true and correct.							
Lu	SUBJECT TO LIVE	<u> </u>					A	uthorised Signator
	SHO IFOT TO LIVEE	ADAD HIMA	DIATION					

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

• Page(s) 1 Of 1

18-11-2020 3:05:36 PM

Orig

16.11.20

From Company: Nilgiri Estates

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

G S T No.: 36AAHFN0766F1ZA

Supplier Details				***	
Praful Sanitary		Doc No	72250	175026	
3-6-138/5, Himayat Nagar, Hyd	erabad.	Doc Date	Doc Date 18-11-2020		
	Quote No	Nil			
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	18-11-2020 Supply		
65526886.	9849624797	SupplyType			
	······································				

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 10042 - Plumbing - PVC - PVC Rigid Tee - 1 1/2 - nos Sudhkhar brand	6.00	45.99	45.00	18.00	179.09
2 7069 - Plumbing - GI - Nipple - other - nos 1 1/2" x 6"Tata make	12.00	94.90	25.00	18.00	1,007.84
3 10146 - Plumbing - GI - N R V - 1 1/2 In - nos Vertical Zoloto	3.00	1,799.00	35.00	18.00	4,139.50
Rupees: Five Thousand Three Hundred Twenty Six and Paise	l		rder Valu	e	5,326.42

Terms and Conditions :-

Specification / Brand As per details given in the quotation.

Payment Terms

Within 10 days of delivery.

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

Nil

Transportation Cost

Included in the above price.

Warranty

Nil

Advance Paid

Nil

Other Terms

We reserve the right items not confirming to qity & specs. Breakage in your account. Above order for extra sump in each pump purpose.

Completion Date

Nil

Measurment Security

Nil Nil

Remarks

For Nilgiri Estates

Authorised Signatory

Accepted the above Terms And Conditions For Praful Sanitary

Name: Date : __/__/___ Requisition Form

Company Name:	NILGIRI ESTAT	ES	Date:			27.10.2020			
Site & Phase: NILGIRI ESTATE			Time:		-	11:40			
Supplier	.7.41. <u>t.</u>	Req. No.			175026				
Material required before date:			ID No	•		61558			
No Des	cription		Size	Quantity	Units	Inward No	Date		
1 PVC -T	· · · · · · · · · · · · · · · · · · ·		1 1/2"	06	Nos				
GI nipple					Nos				
2	125		/2"x6"	12					
3 Non retain ball vertica	t (Brass)	1	1/2**	03	Nos				
4	77	` ·	-						
5	4 }								
6			7.61						
7									
8									
9					x				
10					DOR	OVED /			
Remarks: - for inserting extra	pupms in each sump	purpose			Ar.	OVED OV 2020			
Prepared By	Vijay		Аррго	oved by	166	OKAR			
Sign.& Date Note: On receipt of material at	22.10.2020			& Date	D PR	ABHAKAR HAGER PURCHASE			
Company Name:			Date:						
Site & Phase :			Time:						
Supplier		-	Req. 1						
Material required before date:	Urger	nt	ID No).					
No Des	scription		Size	Quantity	Units	Inward No	Date		
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Prepared By		· · · · · · · · · · · · · · · · · · ·	Appro	oved by					
Sign.& Date			Sign.	& Date					

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