

PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	3-12-20	Prepared by:	T Bhasker
PO/WO no.	72216	PO / WO Date.	18/11/20
Supplier Name	P. N. S. S. S.	PO/WO amount	110094
Firm/Company	SSCP	Project	SHCP
Sl. No.	Bill No.	Bill Date	Bill amount
1	548	19/11/20	110094
2			
3			
4			110094

Amount A – Bills total(Excluding Transport & Hamali Charges):

Sl. No.	DC No	DC. Date	MRN No.	DC matches MRN
1.			85378	☐ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No

Amount B – Other Credits :Transportation charges

Amount C – Other Debits :

Amount D (D=A+B-C) – Amount to be credited to the supplier:

Amount E – PO / WO value:

Amount F – Difference (A – E): GST-18%

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	11/12/20

Remarks:

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:							
Date	03-12-20						

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. 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/-

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

Buyer

Summit Sales LLP
5-4-187/3&4, IInd Floor, M.G Road
Secunderabad
GSTIN/UIN : 36ACQFS2044C1Z7
State Name : Telangana, Code : 36

Invoice No.	e-Way Bill No.	Dated
PS/20-21/ 548	151270827364	19-Nov-2020
Delivery Note		
Invoice		
Supplier's Ref.	Other Reference(s) 9502211788 Mr. Vasu	
Buyer's Order No.	Dated 18-Nov-2020	
Despatch Document No.	Delivery Note Date 19-Nov-2020	
Invoice		
Despatched through	Destination Cherlapally	
Goods Vehicle	Motor Vehicle No. AP09TB0714	
Bill of Lading/LR-RR No.		

SI No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	Extended Wall Mounted Closet Etios (White) Hindware	6910	18 %	20 No.	9,330.00	No.	50 %	93,300.00
	Output CGST							8,622.00
	Output SGST							8,622.00
	Transport Charges @ 18%	99	18 %					2,500.00
Total				20 No:				₹ 1,13,044.00

Amount Chargeable (in words)

Indian Rupees One Lakh Thirteen Thousand Forty Four Only

E. & O.E

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
6910	93,300.00	9%	8,397.00	9%	8,397.00	16,794.00
99	2,500.00	9%	225.00	9%	225.00	450.00
Total	95,800.00		8,622.00		8,622.00	17,244.00

Tax Amount (in words) : **Indian Rupees Seventeen Thousand Two Hundred Forty Four Only**

Company's PAN : ACWPG4864A

Declaration

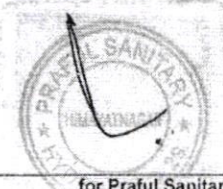
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

for Praful Sanitary

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice



INWARD	
Inward No: 15273	Dt: 19/11/20
MRN No: 85378	Dt: 20/11/20
Received By:	Sign: <i>[Signature]</i>
SUMMIT SALES LLP	





E - WAY BILL SYSTEM



e-Way Bill



E-Way Bill No: **1512 7082 7364**
 E-Way Bill Date: **19/11/2020 10:49 AM**
 Generated By: **36ACW PG486 4A1ZG - ASHISH GUPTA**
 Valid From: **19/11/2020 10:49 AM [20Kms]**
 Valid Until: **20/11/2020**

Part - A

GSTIN of Supplier: **36ACWPG4864A1ZG,PRAFUL SANITARY**
 Place of Dispatch: **Hyderabad,TELANGANA-508126**
 GSTIN of Recipient: **36ACQ FS204 4C1Z7 ,SUMMIT SALES LLP**
 Place of Delivery: **SECUNDERABAD,TELANGANA-501301**
 Document No.: **PS/20-21/548**
 Document Date: **19/11/2020**
 Transaction Type: **Regular**
 Value of Goods: **₹ 113044**
 HSN Code: **6910 - WC(+1)**
 Reason for Transportation: **Outward - Supply**
 Transporter:

Part - B

Mode	Vehicle / Trans Doc No & Dt.	From	Entered Date	Entered By	CEWB No. (If any)	Multi Veh.Info (If any)
Road	AP09TB0714	Hyderabad	19/11/2020 10:49 AM	36ACWPG4864A1ZG	-	-



151270827364

Purchase Order

Page(s) 1 Of 1

18-11-2020 10:37:37 AM

Original



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
3-6-138/5, Himayat Nagar, Hyderabad.

GSTIN 36ACWPG864A1ZG
65526886.

40077300
9849624797

Doc No	72216	168132
Doc Date	18-11-2020	
Quote No	Nil	
Quote Date	18-11-2020	
SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 10232 - Plumbing - sanitary - EWC + flush tank + seat cover - NA - nos	20.00	9,330.00	50.00	18.00	110,094.00
Total Order Value . . .					110,094.00

Rupees : One Lakh(s) Ten Thousand Ninty Four Only.

Terms and Conditions :-

Specification / Brand All items shall be of 'Hindware brand

Payment Terms After Delivery & Production of bill

Tax GST 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.

Penalty For Delay Nil

Transportation Cost Extra.

Warranty Nil

Advance Paid Nil

Other Terms We reserve the right to reject items not conforming to quality and specifications. Above order for stock maintain 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:		17.11.2020	
Site & Phase :		SHLLP		Time:		11.30	
Supplier				Req. No.		168132	
Material required before date:				ID No.		61602	
No	Description	Size	Quantity	Units	Inward No	Date	
1	EWC full set	White	20	nos			
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
Remarks: For stock maintenance at sslp and site use							
Prepared By		SOWMYA		Approved by			
Sign. & Date		17.11.2020		Sign. & Date			

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

APPROVED

19 NOV

P. PRABHAKAR
Sr. MANAGER PURCH