

PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	07-12-20		Prepared by:	Prabhakar.P	
PO/WO no.	72685		PO / WO Date.	23-11-20	
Supplier Name	G.P.Buildcon Materials		PO/WO amount	9,381-00	
Firm/Company	Nilgiri Estates		Project	NE	
Sl. No.	Bill No.	Bill Date	Bill amount		
1	GP/20-21/397	04-12-20	9,381-00		
2					
3					
4					
Amount A – Bills total(Excluding Transport & Hamali Charges):					
Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN	
1.			86983	☒ 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:					
9,381-00					
Amount E – PO / WO value:					
9,381-00					
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. <u>1/-</u> ☒ No					
Payment – due date					
14-12-20					
Remarks:					
Approved by	Purchase Officer	Purchase Manager	Procurement Manager	MD	Accounts – receiver of bill
Sign:					Accounts Manager
Date					

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/-

Tax Invoice



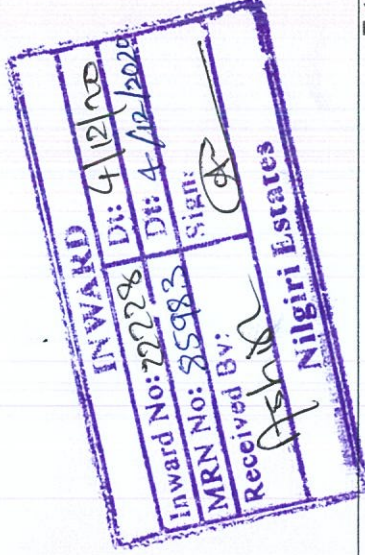
G.P. BUILDCON MATERIALS
G-1, Sai Srinivasa Towers, 29 - Sriपुरi Colony
Kakaguda, Secunderabad - 15
GSTIN/UIN: 36AIZPG8119P1Z9
State Name : Telangana, Code : 36
Contact : 9866116375, 9490056802
E-Mail : g.pbuildcon999@gmail.com

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.	GP/20-21/397	Dated	4-Dec-2020
Delivery Note			
Buyer's Order No.		Dated	
72685		3-Dec-2020	
Despatch Document No.		Delivery Note Date	
Despatched through		Destination	
Direct-Sandesh		Rampally	

SI No.	Description of Goods	HSN/SAC	Quantity	Rate	per	Amount
1	GBH 200 Sino: 026010696	84672100	1 NOS	4,800.00	NOS	4,800.00
2	GBM 13 RE Sino: 021055706	84672100	1 NOS	3,150.00	NOS	3,150.00
	CGST @ 9 %			9 %		7,950.00
	SGST @ 9 %			9 %		715.50
						715.50
			2 NOS			₹ 9,381.00
						E. & O.E



Amount Chargeable (in words)

INR Nine Thousand Three Hundred Eighty One Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
84672100	7,950.00	9%	715.50	9%	715.50	1,431.00
Total	7,950.00		715.50		715.50	1,431.00

Tax Amount (in words) : **INR One Thousand Four Hundred Thirty One Only**

Company's Bank Details
Bank Name : **ICICI BANK LTD**
A/c No. : **630805500095**
Branch & IFS Code: **VIKRAMPURI & ICICI0006308**



Company's PAN : **AIZPG8119P**

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

SUBJECT TO SECUNDERABAD JURISDICTION

This is a Computer Generated Invoice

Purchase Order

Original

72685

25.11.20 1:28:07

From Company : **Nilgiri Estates**
 5-4-187/3 & 4, IIInd Floor, M.G.Road, Secunderabad - 500003.
 G S T No. : 36AAHFN0766F1ZA

Supplier Details

G.P.Buildcon materials	Doc No	72685	175058
flat.no.G1, Salsrinivasa towers, Sri puri Colony, Kakaduda, secunderbad	Doc Date	03-12-2020	
	Quote No	NIL	
	Quote Date	03-12-2020	
	SupplyType	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	4,800.00	0.00	18.00	5,664.00
2 5028 - Equipment - machinery - Hammering Machine - other - nos Reversible GBM-13	1.00	3,150.00	0.00	18.00	3,717.00
Total Order Value . . .					9,381.00

Rupees : Nine Thousand Three Hundred Eighty One Only.

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 Estate

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

Phone. 9030931172, 8297349480

Penalty 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 Nil

Remarks Nil

For **Nilgiri Estates**
 Authorised Signatory

Accepted the above Terms And Conditions
 For **G.P.Buildcon materials**

Name : _____

Date : __/__/____

Requisition Form

Company Name:		NILGIRI ESTATES		Date:	30.11.2020	
Site & Phase :		NILGIRI ESTATE		Time:	4:40	
Supplier				Req. No.	175058	
Material required before date:				ID No.	61949	
No	Description	Size	Quantity	Units	Inward No	Date
1	Bosch Hammer Drill Machine	STD	1	No's	4800/-	18/.
2	Bosch reversible Drill Machine	STD	1	No's	3150/-	18/.
3						
4						
5						
6						
7						
8						
9						
10						

Remarks: - for Site use purpose..

Prepared By
Sign. & Date

Vijay

30.11.2020

Approved by

Sign. & Date

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

APPROVED BY
02 DEC 2020
SOHAM MODI
MANAGING DIRECTOR

Company Name:				Date:		
Site & Phase :				Time:		
Supplier				Req. No.		
Material required before date:		Urgent		ID No.		
No	Description	Size	Quantity	Units	Inward No	Date
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Remarks:

Prepared By

Sign. & Date

Approved by

Sign. & Date

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