PURCHASE DIVISION Advice for approval for credit to supplier

Date:											
			11/2	1	·	Prepare	d by:		PRABHA	AKAR.P	
PO/WO no.		7	3422)		PO / WO Date.		20 10 cm			
Supplier Na		Elega	uf B	ufun	w)·	PO/WC	amount		'50-1		
Firm/Comp	any.	Elega	NF			Project			30-12-20 HHK-1656		
Sl. No.		Bill No.	14			Bill Date		NE			
1	EE2021-0355						Bill amount				
3			7.77		30-12-20		2,002-60				
4				<u> </u>				<i>:</i>)	
Amount A	Dilla	40401/F1 1			·						
		total(Exclud	ing Transpo	ort & Ha	mali Charg	ges):			2,0	02-0	
		DC. Dat	MRN No.		No.	DC matches MRN					
	1.			1 07005		005	Yes D No				
2.				/	87095		043	□ Yes □ No			
3.				/			□ Yes □ No				
Amount B -	Other	Credits : Tra	ansportation	charges			<u> </u>		n ies n Mo		
Amount C –Other Debits:											
Amount D (D=A+B-C) - Amount to be credited to					the and	he cumplian					
		WO value:		to	ule suppu	er:			2,002	-10	
		$\frac{\text{rence } (A - E)}{\text{rence } (A - E)}$) CCM 100	<u> </u>					2,002	·#2.	
				ó					Octo	- (3	
		as per PO /V			□ Yes v	Excess re	ceived [Short received	d o Other (expla	ined 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)						
dvance pai	d/PI	OC given (dec	duct when p	aying)	□ Yes –		√o No			elow)	
Payment - d						0					
Remarks:		 			$\lfloor \underline{U}$	$\leq (1/2)$	1				
			-		>						
Approved		Durches		\	11	- A Company of the Co				· · · · · · · · · · · · · · · · · · ·	
by		Purchase Officer	Purchas Manage		Manager	D V	1,D	Accounts – receiver of	Accountant	Accounts	
ign:			7285	<u>þ9</u>	JAN 20	21 - 1	 	bill		Manager	
Pate	+		2	MINI	ISH PAF	1141					
es: 1. In cas	se ama	ount to be cre	dited to	MANAGE	R PROCUP	EMENT		_			

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/-

36Ajbpk0412E1Z\	Orignal fo	r Receipient	☐ Duplic	ate for Sup	oplier / Tr	ansporter	☐ Trip	licate for S	upplier	GST INVOICE
A	7						to the same of the			CASH CREDI
		F	Elego	ant \mathcal{E}_1	nterp	rises				·
/ = \		5-4-187 Phone: (/7/3, Karbala N	Maidan, M.	G. Road, Se	ecunderabad-	500003			
ELEGANT	Preventers I Anno	unciators I Switc)40- 6638-5358 hgears I Starte	rs i Wires 2	aress: eleg	antnyd@hotr	nail.com			
	Step Down Trans	fromers I L.E.D L	ights Earthin	g Equpimen	its I Carbon	Brushes I PV	C Insulation	Accessories Tanes I Lu	I Oil Seals	
Reverse Charge : nvoice Number :	(4)				Transport	tation Mode	:	Not Applic		
nvoice Number :	EE2021-0355 31 December 20	วก			1 '	R Number	:	Not Applic	able	
tate :	Telangana	20	State Code :	36	Date of Si Place of S		:	31 Decemb		
				s of Buy			:	Hyderabad	1	
lame : M/s Nilg	giri Estates			·		Challan No. :	Not Applie	shlo	·	N - 4 -
Address : 5-4-187/3	3 & 4, 3rd Floor,					Order No. :		ivie		Date : - x - Date : 30.12.20:
Mahatma Secunder			Delivery I	ocation	Nilgiri Esta					
STIN : 36AAH							136, Rampall			
tate : Telangan	State Code :	36	Term of	Payment :	☐ Against i		Against P □ ays from date	roforma Invoice		
								vvicinii) 30 u.	ays nom date	or mvoice.
SI. No.	Description of G		HSN/SAC	Quantity	UoM	CGST %	SGST %	IGST %	Rate	Amount
1 40mm x 6	mm x 3Lengths GI F	lat	7212	29.00	Kg(s)	9.00	9.00	0.00	58.50	1696
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		INWAI								
<u> </u>				12						
	In ≫ard No		Dt: OU							
	MRN No:	87095	Dt: 04	01/21	<u> </u>					
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Origina

73432

31.12.20 3:26:34

From Company: Nilgiri Estates

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

GSTNo.: 36AAHFN0766F1ZA

Supplier Details				
Elegant Enterprises	Doc No	73432	175111	
5-4-187/7/3,Karbala Maidan	Doc Date	30-12-2020 Nil 30-12-2020		
	Quote No			
GSTIN 36AJBPK0412E1ZY	Quote Date			
66385358	9985113450/9885073880	SupplyType	Supply	

Kind Attn: Mr.Gaurang Kadakia/Mahesh Kadakia

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 4738 - Electrical - other - GI Flat - Others - nos 1 1/2" 3 lenths 6 mm	24.00	58.50	0.00	18,00	1,656.72
Rupees: One Thousand Six Hundred Fifty Six and Paise Se		Total Or	der Value	B	1,656.72

Terms and Conditions :-

Specification / Brand As per details given in the quotation.

Payment Terms

After Delivery & Production of bill

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

Nit

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Above items for Transformer purpose

Completion Date

Nil

Measurment Security Nil Nil

Remarks

For Nilgiri Estates

Authorised Signatory

Accepted the above Terms And Conditions

For Elegant Enterprises

Name :

Name : _____

Date : __/__/___

Company Name: NILGIRI ESTATES Date: 28.12,2020 Site & Phase: **NILGIRI ESTATE** Time: 16:27 Supplier Req. No. 175111 Material required before date: ID No. 62668 No Description Size Quantity Inward No Date Units MS Flat Patti 1 1/2" 40 Feet's G.I. 3432 2 3 4 APPROVED 5 6 3 0 DEC 2020 7 MINISH PARIKH MANAGER PROCUREMENT 8 9 10 Remarks: - For Transformer neutral Purpose Prepared By Anil.M Approved by Sign.& Date 28.12.2020 Sign. & Date Note: On receipt of material at site write inward number and date in last 2 columns. Company Name: Date: Site & Phase: Time: Supplier Req. No. Material required before date: Urgent ID No. Νo Description Size Inward No Quantity Units Date 1 2 3

Approved by

Sign. & Date

Requisition Form

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

Remarks:

Prepared By

Sign.& Date