# PURCHASE DIVISION Advice for approval for credit to supplier

Date:		120	1 202			Prepared	by:		NEH	A	
PO/WO no	mount A – Bills total(Excluding Transport & I. No. DC. No  No. DC. No  DC. D  Taylo  Taylo  Land  Taylo  Land  Taylo  Land  Land  Taylo  Land  Land  Taylo  Land  Land  Taylo  Land  Land  Land  Toylo  Toylo					PO / WO	Date.		30/12/2020		
Supplier N	ame			and to	hH.	PO/WO	amount		3886	N.	
Firm/Comp	PO/WO no.  Supplier Name  Firm/Company  SI. No.  Bill No.  1  2  3  4  Amount A – Bills total(Excluding Transport & F. D.C. D. D.C. D.C. D.C. D.C. D.C. D.C					Project			4 .	rade menos	
Sl. No.		1			J	Bill Date	;		Bill amount	42	
1		760				016	11/20	021	3886	1_	
2		109					31 4	021	3886	1	
3											
4											
Amount A	– Bills t	otal(Excludi	ng Transp	ort & Han	nali Charg	ges):			3886	1	
Sl. No.	DC .N	O		DC. Date	2		MRN N	No.	DC matches M	RN	
1.		1		1			8-	1279	□ Yes □ No		
2.					\	0 (21)			□ Yes □ No		
3.											
Amount B	-Other	Credits :_Tra	nsportation	n charges							
Amount C	-Other	Debits									
Amount D	(D=A+I	B-C) – Amo	unt to be c	redited to	the suppli	er:			3886		
Amount E	– PO / V	VO value:							3886	1-	
Amount F	- Differ	ence (A – E)	: GST-18%	6						•	
Quantity re	ceived a	as per PO /W	/O		TYes 🗆	Excess re	ceived	Short received	l □ Other (explain	ned below)	
Is difference	e betwe	en PO / Bill	acceptable	?	□ Yes □	No (expla	ined belo	ow)			
Excess / sh	ort mate	erial received	1		□ Appro	ved - with	in accep	otable limits	No (explained be	elow)	
Close PO /	W?O				■ Yes □	No – wait	for bala	nce material	No (explained b	elow)	
Advance pa	aid / PD	C given (dec	duct when	paying)	□ Yes –	Rs. /	No				
Payment -	due date	•			18	01/20	21				
Remarks:											
Approve by	ed	Purchase Officer	Purcha Manag	2000	rocureme Manager	2220	1 D	Accounts – receiver of bill	Accountant	Accounts Manager	
Sign:	1	John	DS	->							
Date	12	101/21	121	7	- 1 .1 - 1 '11	- 4-4-1-1		tal man T	for debit or cree	lia 2 Associa	

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		Invo	ice No.		Date	ed	
3-6-429/6,SRI SAI TOWER,			20-21/ 704		1-J	an-2021	1
St.No.4 HIMAYAT NAGAR HYDERABAD			very Note				
GSTIN/UIN: 36ACWPG4864A1ZG			plier's Ref.		Oth	er Refer	ance(s)
State Name : Telangana, Code : 36 E-Mail : prafulsanitary@gmail.com		Sup	pilei s Rei.		Cre		erice(s)
Buyer		Buye	er's Order N	lo.	Date		
MC Modi Educational Trust		734	10		30-	Dec-20	20 .
5-4-187/3&4, IInd Floor, M.G. Road		Des	patch Docu	ment No.	Deli	very Not	e Date
Secunderabad GSTIN/UIN : 36AAATM5488Q2Z0			oice			an-2021	1
State Name : Telangana, Code : 36			patched thr	ough	2000000	tination	
The state of the s		Self			Thu	urkapal	ly
SI Description of Goods	HSN/SA	C GST Rate	Quantity	Rate	per	Disc. %	Amount
1 140mm Pvc Rigid Pipe	3917	18 %	1 Ingths	4,704.00	Ingths	30 %	3,292.80
Output CGST Output SGST ROUNDING OFF							296.35 296.35 0.50
OPERTIES .	and the same						
(SIMWARD) SI	200	200	0.000 2000 2000				0 2000 0
No. 13225		WI VIII					
10 December 12		25	1-1				
		8	100 to 100				
SECIE AD		1,000		B 1 1522			<b>3</b>
		- 68					
		14.					
INWARD			50 mm	A S S G			
		17.7%	1. 147		1		
Inward No: 10138 Dt: 06(01/2)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	F-15-75	- 3		30,000
MRN No: 87279 Dt: 08 01 21		100,700	9 9 8			- 1	
Received By: Sign:		500					
Security Ar							
MC MODI EDUCATIONAL TRACE					1.	- 1	
INC. MODI PROCUIONAL PLANTA IN THE PROCUIONAL PROCESSAR AND ASSOCIATION ASSOCI	in an incident						
And the second s	F 7		1100	- 15			
			41				
Amount Chargeable (in words)			1 Ingths				₹ 3,886.00
Indian Rupees Three Thousand Eight Hundred Eighty Six	Only						E. & O.E
HSN/SAC		axable	Central	Tax	Sto	te Tax	Total
	3000	Value			ate	Amoun	Total t Tax Amount
3917		3,292.80		296.35	9%	296.	35 592.70
		3,292.80		296.35		296.	592.70
Tax Amount (in words): Indian Rupees Five Hundred Ninety Two  Company's PAN : ACWPG4864A	and Se	eventy p	aise Only			HIME	AGAR *
Declaration						fo	r Praful Sanitary
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.						11	
SUBJECT TO HYDERA	BAD JURIS	SDICTION				Aut	horised Signatory
This is a Computer G							

## **Purchase Order**

Page(s) 1 Of 1

30-12-2020 15:49:16

#### From Company: **MC Modi Educational Trust**

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

G S T No.: 36AAATM5488Q2Z0

Supplier Details					
Praful Sanitary		Doc No	73410	162063	
3-6-138/5, Himayat Nagar, Hyde	erabad.	Doc Date	30-12-2020		
		Quote No	Quote No Nil		
GSTIN 36ACWPG864A1ZG	40077300	<b>Quote Date</b>	30-12-2020		
65526886.	9849624797	SupplyType	Supply		

## Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 7247 - Plumbing - PVC - Rigid Pipe - other - lengths 5"	1.00	4,704.00	30.00	18.00	3,885.50
		Total Or	der Value	e	3,885.50

## Terms and Conditions :-

Specification / Brand 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** 

Manilal Modi Memorial Hospital

Phone.

**Penality For Delay** 

Nil

Transportation Cost

Transport cost shall be borne by us.

Warranty

Nil

Advance Paid

NII

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Above order for ground floor sleeves purpose.

**Completion Date** 

Measurment Security

Nil Nil

Remarks

For MC Modi Educational Trust

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary** 

Name :

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

Requisition Form

0				Requisi	HOII I'O	1111				
Company Name: MC			MCMET					28-12-2020		
Site &	& Phase :	Manilal Modi memmorial Hospital			Time:			10:30AM		
Supp	lier				Req.No.			162063		
Material required before date: 36			30-12-202	30-12-2020		:		62656		
No	Descrip	otion		Size		Quantity	Units		Date	
1	Rigid pipe (20' Length)			5"		01 No's				
2		734	0 0							
3		1)					1			
4										
5						-	APPRO	IVED		
6										
7							3 0 DEC			
8							MINISH	PARIKH		
9							MANAGER PR	OCUREMENT		
Rema	arks: Towards MCMET G	round floor	sleeves clos	sing purpose	e					
Prepared By		Pushpalatha		Approved by			T.Madhu			
Sign.& Date		28-12-20	28-12-2020		Sign. & Date			28-12-2020		

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