## PURCHASE DIVISION Advice for approval for credit to supplier

Date:		0	<i>p</i>   , ,	21		Prepared	by:		PRABHA	KAR.P		
PO/WO no		7	265	7)		PO / WO Date.			10/1-1			
Supplier N	ame	Pruful Lanish			1	PO/WO amount			12/1/2)			
Firm/Company Paris to			<del>y</del> -	Project			21.001.05					
Sl. No. Bill No.				<del></del>	Bill Date			SHLU				
1				1	·	Din Dati	- 		Bill amount			
3		13/21	2-21	17155	<u>}</u>		5/1/	21	21,00	1-00		
4					· ·		<u> </u>		A			
		·										
		total(Excludin	g Transı	oort & Har	nali Charg	ges):		_	21.08	1.00		
Sl. No.	DC.	No		DC. Date	=		MRN	No.	DC matches M			
1.		1			1		2	1585 1	Yes D No	·		
2.					/	<del>-</del>	0 (	797	□ Yes □ No			
3.		<del>                                     </del>		<del>/-</del>	<u> </u>		<del> </del> -		<u></u>			
Amount B -Other Credits: Transportation charges												
Amount C-Other Debits:						-00						
		-B-C) – Amou	nt to be	redited to	411		<del></del>		<			
Li. 4					the suppi	ier: 			22,771	-10		
Amount E – PO / WO value:  Amount F – Difference (A – E): GST-18%									21,0001-10			
				%						( - 00		
		as per PO/Wo			Yes 🗆	Excess re	ceived r	Short received	d □ Other (explai	ned below)		
Is difference	e betw	een PO / Bill a	cceptab	le?		No (expl						
					☐ Approved – within acceptable limits ☐ No (explained below)							
Close PO /	W?O			<del></del>					No (explained b			
Advance p	aid / Pl	DC given (dedu	ct when	paying)	□ Yes –		No No		- (explained b	elow)		
Payment -				-		1						
Remarks:	<u> </u>				2	811	2					
			<del></del>						:			
Approve	d I	Dometra		· · · · · · · · · · · · · · · · · · ·	11							
by	u	Purchase Officer	Purch Mana	4 L 79	rocureme Manager		A.D	Accounts – receiver of	Accountant	Accounts		
Sign:	+		٨,			2011	-	bill		Manager		
Date			P.			I -	P P P P P P P P P P P P P P P P P P P					
	ase am	Ount to be cred	21	1 MANA	NISH P. GER PROC	AR KH ZURU DENT	, property of the control of the con					

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/-

	6-429/6,SRI SAI TOWER,			Invo	ice No.		Dat	ed	<del></del>
St	No.4 HIMAYAT NAGAR			PS/	20-21/7	53		Jan-20	194
H	YDERABAD			Deliv	very Note			<u> </u>	<u>,                                    </u>
St	STIN/UIN: 36ACWPG4864A1ZG ate Name : Telangana, Code : 36			Invo					
E-	Mail : prafulsanitary@gmail.com			Sup	plier's Re		Oth	er Refe	rence(s)
Вυ	yer			L				22117	
St	ımmit Sales LLP				er's Order	No.	Dat	ed	
5-	4-187/3&4, IInd Floor, M.G. Road			736	50		8-J	an-202	21
56	ecunderabad			Des	patch Doc	ument No.	Del	ivery No	ote Date
	STIN/UIN : 36ACQFS2044C1Z7			invo		<u></u>	15-	Jan-20	)21
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SI	Description of	HSN	/SAC	GST	0				
No.	Goods and Services	1.1014		Rate	Quantity	Rate	per	Disc. %	Amount
1	Loft Tank 200 Litres	1			<del>                                     </del>	/	<del></del>	<del> </del> -	
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	Total	┼			45.				
Am	ount Chargeable (in words)	<u> </u>	<u>_</u>		15 No	):  <u> </u>	<u> </u>		₹ 22,771.00
In	dian Rupees Twenty Two Thousand Seven Hundred Sev		_ :						E. & O.E
	HSN/SAC	venty			:	1 1			* **
		:	Taxal		Centra	I Tax	Sta	te Tax	Total
39		·	Valu 17,79				ate	Amour	nt Tax Amount
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-		otal	19 20	7 50		135.00 1,736.78	9%	135	
Tax	(Amount (in words): Indian Rupees Three Thousand Four Hu			4		1,7 30.78		1,736	.78 3,473.56
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Dec	plaration					:		17	or Praful Sanitary
VVE	e declare that this invoice shows the actual price of the goods		•						Jan State Control of the Control of
TAG.	y and that all particulars are true and correct.					:		_	
	SUBJECT TO HYDERA	ABAD II	URISDIC	TION		-		A	uthorised Signatory
M.	This is a Computer G	senerate	ea invoic	æ					
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INWARD
Inward No: 1562 FDt: 1511/21
MRN No: 87 585 Dt: 6 01 21
Received By: Sign:
SUMMIT SALES LLP

## Purchase Order

Page(s) 1 Of 1

08-01-2021 16:25:21

09.01.21 11:04:30

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		Doc No	73650	168284
3-6-138/5, Himayat Nagar, Hyderab	Doc Date	08-01-2021		
		Quote No	Nil	
GSTIN 36ACWPG864A1ZG	Quote Date	08-01-2021		
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 7345 - Plumbing - PVC - Loft Tank - Other - Nos 200 ltrs	15.00	1,400.00	15.25	18.00	21,001.05
Rupees : Twenty One Thousand One and Paise Five Only.	1	Total O	der Valu	e	21,001.05

## Terms and Conditions :-

Specification / Brand All items shall be of 'Plasto' brand.

Payment Terms

Within 30 days of delivery.

Tax

Inclusive of all taxes

**Delivery Date** 

Within 7 days

**Delivery Location** 

Summit Housing LLP

Cherlapally, Behind Kingston PG college, Hyderabad

Phone. 9618244433, Hamendra,9502266233, Mahesh.

Penality 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 purpose.

**Completion Date** 

Nil

Measurment Security

Nil Nii

Remarks

For Summit Sales LLP Authorised Signatory

Accepted the above Terms And Conditions

For Praful Sanitary

Name :
--------

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

Requisition Form Company Name: Summit sales llp Date: 5.1.2021 Site & Phase: Summit housing llp Time: 11.00 Supplier Req. No. 168284 Material required before date: ID No. 62899 No Description Size Inward No Quantity Units Date LOFT TANKS 1 200LTRS 15 NOS 2 3 4 5 6 7 8 9 10 12 13 14 15 16 Remarks: For stock maintenance and site use Prepared By SOWMYA Approved by Sign.& Date 5.1.2021 Sign. & Date Note: On receipt of material at site write inward number and date in last 2 columns.