PURCHASE DIVISION
Advice for approval for credit to supplier

	29/01/21	Prepared by:	D.SOWMYA
PO/WO no.	74025	PO / WO Date.	21/01/21
Supplier Name	Praful Sanitary	PO/WO amount	18,532/-
Firm/Company	SSIIP	Project	SHLLP
Sl. No.	Bill No.	Bill Date	Bill amount
1	789	23/01/21	18,532/-
2			
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			18,532/-

Sl. No.	DC No	DC. Date	MRN No.	DC matches MRN
1.			87895	☑ 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:				18,532/-
Amount E – PO / WO value:				18,532/-
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	~~23.1.2021~~ 05/02/21
Remarks:	

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	Kuldeep	[signature]	[signature] APPROVED 30 JAN 2021 MINISH PARIKH MANAGER PROCUREMENT				
Date	29/01/21	30/1/21	2/1				

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 app 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, ex transport, Hamali charges, etc and instead include in Amount B. 6. To be approved by accounts manager if bill value exce 10,000/- 7. MD to approve all bills above 1,00,000/-

GST INVOICE

(ORIGINAL FOR RECIPIENT)

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

Invoice No. **PS/20-21/ 789**	Dated **23-Jan-2021**
Delivery Note **Invoice**	
Supplier's Ref.	Other Reference(s) **Credit**
Buyer's Order No. **74025**	Dated **21-Jan-2021**
Despatch Document No. **Invoice**	Delivery Note Date **23-Jan-2021**
Despatched through **Self**	Destination **Cherlapally**
Bill of Lading/LR-RR No.	Motor Vehicle No. **TS10UA9758**

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

Sl No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**Waste Coupling Half Thread**	8481	18 %	**10 No:**	275.00	No:	35 %	**1,787.50**
2	**CP Grating Square (~~Plain~~)** Hole	7326	18 %	**50 No:**	179.00	No:	35 %	**5,817.50**
3	**25mm Extension Nipple**	8481	18 %	**100 No:**	60.00	No:	25 %	**4,500.00**
4	**40mm Extension Nipple**	8481	18 %	**50 No:**	90.00	No:	20 %	**3,600.00**
								15,705.00
	Output CGST							**1,413.46**
	Output SGST							**1,413.46**
	ROUNDING OFF							**0.08**
	Total			**210 No:**				**₹ 18,532.00**

MODI PROPERTIES PVT. LTD. SECBAD INWARD No. 3774 Dt. 28/1

Amount Chargeable (in words) *E. & O.E*
Indian Rupees Eighteen Thousand Five Hundred Thirty Two Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
8481	9,887.50	9%	889.88	9%	889.88	1,779.76
7326	5,817.50	9%	523.58	9%	523.58	1,047.16
99		9%		9%		
99		14%		14%		
Total	**15,705.00**		**1,413.46**		**1,413.46**	**2,826.92**

Tax Amount (in words) : **Indian Rupees Two Thousand Eight Hundred Twenty Six and Ninety Two paise 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.

PRAFUL SANITARY HIMAYATNAGAR HYD
for Praful Sanitary
Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

INWARD	
Inward No: 15701	Dt: 23-1-21
MRN No: 87895	Dt: 25/01/21
Received By:	Sign:
SUMMIT SALES LLP	

Certified by:

Stores Manager

Purchase Order

21-01-2021 2:27:04 PM

74025
16.01.21 10:57:50

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	74025	168320
Doc Date	21-01-2021	
Quote No	Nil	
Quote Date	21-01-2021	
SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

	Item Name	Qty	Rate	Dis%	GST	Amount
1	7047 - Plumbing - CP - Waste coupling - 1/2 thread - nos	10.00	275.00	35.00	18.00	2,109.25
2	7040 - Plumbing - CP - Sq. jali with hole - 6 In x6 In - nos	50.00	179.00	35.00	18.00	6,864.65
3	7026 - Plumbing - CP - Extension Nipple - 1/2 In - nos *1"*	100.00	60.00	25.00	18.00	5,310.00
4	7028 - Plumbing - CP - Extension Nipple - other - nos *1 1/2"*	50.00	90.00	20.00	18.00	4,248.00
Rupees : Eighteen Thousand Five Hundred Thirty One and Paise Ninty Only.				**Total Order Value . . .**		**18,531.90**

Terms and Conditions :-

Specification /	As per details given in the quotation.
Payment Terms	Within 30 days of delivery.
Tax	All taxes 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.
Penality For Delay	Nil
Transportation	Included by us !
Warranty	7 years warranty
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	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:	Summit sales llp		
Site & Phase :	Summit housing llp	Date:	19.1.2021
Supplier		Time:	11.00
Material required before date:		Req. No.	168320
		ID No.	63243

No	Description	Size	Quantity	Units	Inward No	Date
1	CP WALL MIXTURE		10	NOS		
2	LONG BODY		12	NOS		
3	SHORT BODY		10	NOS		
4	SHOWER ARM 74024		10	NOS		
5	PILLAR COCK		20	NOS		
6	ANGLE COCK		40	NOS		
7	WASH BASIN WASTE COUPLING		10	NOS		
8	CP JALI WITH HOLE		50	NOS		
9	EXTENSION NIPPLE 74025	1/2"	100	NOS		
10	EXTENSION NIPPLE	11/2"	50	NOS		
11						

Remarks: For stock maintenance and site use

Prepared By	SOWMYA	Approved by	
Sign & Date	19.1.2021	Sign. & Date	

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

APPROVED BY
20 JAN 2021
SOHAM MODI
MANAGING DIRECTOR