

PURCHASE DIVISION
Advice for approval for credit to supplier

Date: <u>25/1/21</u>		Prepared by: <u>PRABHAKAR</u>	
PO/WO no. <u>73895</u>		PO / WO Date. <u>12/1/21</u>	
Supplier Name <u>Pratul Sawhney</u>		PO/WO amount <u>5,699.40</u>	
Firm/Company <u>Sunrise L.L.P</u>		Project <u>SHLLP</u>	
Sl. No.	Bill No.	Bill Date	Bill amount
1	<u>PS/20-21/782</u>	<u>21/1/21</u>	<u>5,699.00</u>
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			<u>5,699.00</u>
Sl. No.	DC .No	DC. Date	MRN No.
1.	<u>/</u>	<u>/</u>	<u>87822</u>
2.			
3.			
Amount B –Other Credits : Transportation charges			
Amount C –Other Debits :			
Amount D (D=A+B-C) – Amount to be credited to the supplier:			<u>5,699.00</u>
Amount E – PO / WO value:			<u>5,699.00</u>
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		<u>1/2/21</u>	
Remarks:			
Approved by	Purchase Officer	Purchase Manager	Procurement Manager
Sign:	<u>[Signature]</u>	<u>[Signature]</u>	<u>[Signature]</u>
Date	<u>25/1/21</u>	<u>02 FEB 2021</u>	<u>02 FEB 2021</u>
		MINISH PARIKH MANAGER PROCUREMENT	

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/-

(ORIGINAL FOR RECIPIENT)

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

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

Self

Cherlapally

E. & O.E

Tax Amount (in words) : **Indian Rupees Eight Hundred Sixty Nine and Forty paise Only**

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

Authorised Signatory

This is a Computer Generated Invoice

Certified by:

[Signature]

Stores Manager

Purchase Order

Page(s) 1 Of 1

18-01-2021 11:54:47 AM



73895

16.01.21 10:36:44

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 40077300 65526886. 9849624797	Doc No	73895	168305
	Doc Date	18-01-2021	
	Quote No	Nil	
	Quote Date	18-01-2021	
	SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 3134 - Chemicals - Tile Grout - 1kg - pkts White	70.00	34.50	0.00	18.00	2,849.70
2 3134 - Chemicals - Tile Grout - 1kg - pkts Silk	70.00	34.50	0.00	18.00	2,849.70
Total Order Value . . .					5,699.40

Rupees : Five Thousand Six Hundred Ninty Nine and Paise Fourty Only.

Terms and Conditions :-

Specification /	All items shall be of 'Laticrete' brand.
Payment Terms	After Delivery & Production of bill
Tax	Inclusive of all taxes
Delivery Date	Next Day.
Delivery Location	Summit Housing LLP Cherlapally, Behind Kingston PG college, Hyderabad Phone. 9618244433, Hamendra, 9502266233, Mahesh.
Penalty For Delay	Nil
Transportation	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 is for Stock purpose.
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	

For **Summit Sales LLP**

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary**Name : 

Name : _____

Date : __/__/__

Requisition Form

Company Name:		Summit sales llp		Date:		13.1.2021	
Site & Phase :		Summit housing llp		Time:		11.00	
Supplier				Req. No.		168305	
Material required before date:				ID No.		63139	
No	Description	Size	Quantity	Units	Inward No	Date	
1	TILE ADHESIVE	20KG	20	BAGS			
2	RBR BONDING AGENT	1LTRS	5	NOS			
3	TILE GROUT	WHITE	70	KGS			
4	TILE GROUT	SILK	70	KGS			
5	ANCHOR SET CHEMICAL	1KG	5	NOS			
6							
7							
8							
9							
10							
11							
12							
13							
Remarks: For stock maintenance							
Prepared By		SOWMYA		Approved by			
Sign. & Date		13.1.2021		Sign. & Date			

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

APPROVED BY
13 JAN 2021
SOHAM MODI
MANAGING DIRECTOR