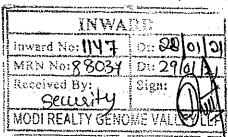
## PURCHASE DIVISION Advice for approval for credit to supplier

Date:		,2	10-	21		Prepare	l by:	· <u> </u>	PRABHA	AKAD			
PO/WO no		3/2/21				PO / WO Date.			THEODIANA				
Supplier Na		74108							23-1-21				
Pina Party Samita			ny:	PO/WO amount			4,339,33						
	any	M	ROIN	<u>^</u>	•	Project			BROW.				
Sl. No.		Bill No.				Bill Dat	e		Bill amount				
. 1		Ps/20.	-21/	802		27/121			4.000				
3						247 (1) 21			4,339.00				
4							<del>                                     </del>						
Amount A	– Bills	total(Excludi	no Trans	mort & Un	moli Cham	l' al				/ .			
Sl. No.	DC .	_			_					4,339.00			
	ъс.,	NO .		DC. Dat	<b>e</b> 		MRN	No.	DC matches M	RN			
1.					1	88037			Yes 🗆 No				
2.						· · · · · · · · · · · · · · · · · · ·		<u> </u>	□ Yes □ No				
3.						<del></del>			□ Yes □ No	<u> </u>			
Amount B -Other Credits: Transportation charges													
Amount C -Other Debits:													
Amount D (D=A+B-C) – Amount to be credited to the supplier:													
Amount E – PO / WO value:							4,339-83						
Amount F – Difference (A – E): GST-18%							4,239-83						
					1/1/1				<				
Quantity received as per PO/WO Yes   Excess received   Short received   Other (explained below						ned below)							
						No (explained below)							
Excess / short material received					<del>&lt;□ Appro</del>	Approved - within acceptable limits □ No (explained below)							
Close PO / W?O  Q Yes   No – wait for balance material   No (ex													
Advance paid / PDC given (deduct when paying)													
Payment – due date													
Remarks:					l	812	<del></del> -						
					<del>\</del>		······································						
Approve	d	Purchase	Purci	nase F	rocurente	nt 3	4D		<u> </u>				
by		Officer	Mana		Manager		M D	Accounts – receiver of	Accountant	Accounts Manager			
Sign:			DX		3 FEB	2021	<u>:</u>	bill					
Date	+		8	,	N 5 * *** * * ***		:						
otes: 1. In c	ase am	ount to be cre			T 1 1 11								

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/-

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Pr	aful Sanitary	<del></del>	lr	voi	ce No.		Dat	ed			
St	6-429/6,SRI SAI TOWER, . No.4 HIMAYAT NAGAR			PS/20-21/ 802				27-Jan-2021			
H	YDERABAD STIN/UIN: 36ACWPG4864A1ZG				ery Note						
St	ate Name : Telangana Code : 36			nvo	ice lier's Ref.		O+15	o- Def-			
<u> </u>	Mail : prafulsanitary@gmail.com		Buyer's Order No.				Į.	Other Reference(s)  Credit  Dated			
	odi Realty Genome Valley LLP										
5~	4-187/3&4, lind Floor			74103			25-	Jan-20	21		
М	G Road, Secunderabad		,		atch Docu	ment No.		very No		te	
St	STIN/UIN : 36ABFFM3063P1ZU ate Name : Telangana, Code : 36				ice atched thro	ough		Jan-20			
			1	elf				rharipa			
							-				
Si	Dooriette		_								
No.		HSN/S			Quantity	Rate	per	Disc. %	Aı	nount	
1	40mm CF Coupler	-		ite	<del>.</del>		-				
2	40mm CF End Cap	3917 3917		3 % 3 %	6 No:	192.00				921.60	
3	32mm Brass Ball Valve	8481		3 %	2 No: 3 No:	138.00 1,300.00				220.80	
			1			.,=====		00 /		2,535.00	
	Output CGST								;	3,677.40	
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	Total	71.475	15		11 No:		<del>'  </del> -		<b>*</b> 4	222 22	
	nount Chargeable (in words)	13.45.5				المرابع	<u>ــــــــــــــــــــــــــــــــــــ</u>	·	₹ 4,	339.00 E. & O.E	
	dian Rupees Four Thousand Three Hundred Thirty Nine		<u>. :</u>					•			
20			Taxable Value		Central Rate An			te Tax		Total	
	<b>181</b>		1,142.4	10	9%	102.81	ate 9%	Amoui 102		205.62	
99			2,535.0	00	9% 9%	228.15	9%	228		456.30	
99					14%	1	9%  4%		-		
Ta		Total	3,677.4	10		330.96		330	.96	661.92	
	x Amount (in words): Indian Rupees Six Hundred Sixty One a	nd Nin	ety Tw	o p	aise Only	!		£,	Ten.	NIX	
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	ompany's PAN : ACWPG4864A	Γ''			<del></del> -	<del></del>	<del></del>		0 to -	i	
W	claration e declare that this invoice shows the actual price of the goods							f	or Praf	ul Sanitary	
de	escribed and that all particulars are true and correct.										
	SUBJECT TO HYDER	ABAD JUI	RISDICTI	ON -				A	uthorise	d Signatory	
	This is a Computer (			-							



16.01.21 11:00:13

Page(s) 1 Of 1

25-01-2021 10:29:53 AM

Ori

From Company: Modi Realty Genome Valley LLP

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

G S T No. : 36ABFFM3063P1ZU

Supplier Details					
Praful Sanitary	Doc No				
3-6-138/5, Himayat Nagar, H	Doc Date				
		Quote No	Nii		
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	23-01-2021		
65526886.	2 <b>6886.</b> 9849624797		Supply		

## Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Qty	Rate	Dis%	GST	Amount
6.00	192.00	20.00	18.00	1,087.49
2.00	138.00	20.00	18.00	260.54
3.00	1,300.00	35.00	18.00	2,991.30
	Total O	rder Valu	e	4,339.33
	6.00	6.00 192.00 2.00 138.00 3.00 1,300.00	6.00 192.00 20.00 2.00 138.00 20.00 3.00 1,300.00 35.00	6.00 192.00 20.00 18.00 2.00 138.00 20.00 18.00

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

Bloomdale Residency at Genome Valley

Murharipalli,servey no-31& 32

Phone. Mr.K.Narender Reddy:7680971999

Penality For Delay Nil

Transportation

Included by us!

Warranty

7 years warranty

**Advance Paid** 

Other Terms

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

**Completion Date** 

Nil

Measurment

Nil Nil

Security Remarks

For Modi Realty Genome Valley LLP

Authorised Signatory

Accepted the above Terms And Conditions

For Praful Sanitary

Name :	Date ://
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Requisition Form Company Name: MRGV Date: Site & Phase: 22.01.2021 BRGV Time: Supplier 16:00PM Req.No. Material required before date: 94760 25-01-2021 ID No. 63314 No Description Size Quantity Inward No Units HDPE Couples Date 1 1 1/4" 6 No's 192 2 GI Ball Valve 1 1/4" 3 No's HDPE End Cap 3 1 1/4" 2 No's 128 4 4 18 5 6 7 8 9 kemarks: Curing line purpose at BRGV. Prepared By Pushpalatha Approved by T.Madhu Sign.& Date 22.01.2021 Sign. & Date Note: On receipt of material at site write inward number and date in last 2 columns. 22.01.2021