PURCHASE DIVISION Advice for approval for credit to supplier

Date:		05	02	21		Prepared	by:		PRABHAKAR			
PO/WO no.						PO / WO Date.		•	01	02/21		
Supplier Na	me	742 Vist	Lon	star	yr.	PO/WO amount			1,266.20			
Firm/Compa	any	Vist	s H	mes	U	Project			Vistationes.			
Sl. No.	В	ill No.				Bill Date			Bill amount			
1 P3/20-21/826				3	2/2	1	881.00					
3							,			/		
4									/ 1			
Amount A –	Bills tot	tal(Excluding	Transpor	rt & Han	nali Charg	ges):			88	1.00.		
Sl. No.	DC .No		Ι	OC. Date			MRI	N No.	DC matches	MRN		
1.					1		8	8277	Yes 🗆 N	lo		
2.									□ Yes □ N	lo		
3.									□ Yes □ N	lo		
Amount B –	Other Cr	redits:_Transp	ortation	charges					-			
Amount C -	Other De	ebits :							-			
Amount D (D=A+B-	C) – Amount	to be cre	edited to	the suppl	ier:		881.	0			
Amount E –	PO / Wo	O value:		79				1,26	6.20			
Amount F –	Differen	ice (A – E): G	ST-18%						385	.20		
Quantity rec	eived as	per PO /WO			☐ Yes ☐ Excess received ♠ Short received ☐ Other (explained below)							
Is difference	between	n PO / Bill acc	eptable?)	□-Yes □ No (explained below)							
Excess / sho	rt materi	al received			□-Approved – within acceptable limits □ No (explained below)							
Close PO / V	W?O				☐ Yes No – wait for balance material ☐ No (explained below)							
Advance pa	id / PDC	given (deduct	when p	aying)	□ Yes – Rs/z□ No							
Payment - c	due date				8/2/21							
Remarks:			Day	ma	mid o	Telm	4		6			
			Ian	10	1.79	1						
Approved		urchase Officer	Purchas	1 /	Procureme		ИD	Accounts – receiver of bill	Accounta	Accounts Manager		
Sign:		1	Ses		05 FEE	3 2021		Oill				
Date		(12	MAN	INISH I	PARIKH	Y			redit 2. Attach		

Notes: 1. In case amount to be credited to supplier and the bills total does not match prepare JV for debit or credit. 2. A 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/-

	GST IN	VOICE				(OF	RIGIN	IAL FOR	RECIPIENT)
Pr	aful Sanitary		Invo	ice No.			Date	ed	
3-	6-429/6,SRI SAI TOWER,			20-21/			3-F	eb-2021	
	No.4 HIMAYAT NAGAR ′DERABAD			very Not	te				
G	STIN/UIN: 36ACWPG4864A1ZG			plice	of		Oth	er Refere	noo(s)
	ate Name : Telangana, Code : 36		Sup	pilei s K	lei.		Cre		ince(s)
	Mail : prafulsanitary@gmail.com yer		Buy	er's Ord	er No.		Date	0.02-0.002	
	sta Homes		742				1-F	eb-2021	
	4-187/3 & 4, IInd Floor, M.G.Road		Des	patch D	ocument N	No.	Deli	very Note	Date
	cunderabad STIN/UIN : 36AAGFV2068P1ZJ			oice				eb-2021	
	ate Name : Telangana, Code : 36		1 == =		through			tination	
			Self				Kus	shaigud	а
SI	Description of	HSN/SAC	GST	Quan	tity Ra	te	per	Disc. %	Amount
No.	Goods and Services		Rate	-			_		
1	20mm Metal Clamp 25mm Metal Clamp	7318 7318	18 % 18 %				No: No:	25000 25000	175.56 571.45
								-	747.01
	Output CGST Output SGST Less: ROUNDING OFF								67.23 67.23 (-)0.47
									(-)0.47
				an had					
	12/2		100	-	27.0		-		
	10 Mous			100				n sees	
	12/3/12/3/			100					
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	nward No: 9 568 Dt: 03 04 7		5.34				Tres	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	WRN No: 00914 Dt:								
	AM								
	Received Bo	100.13		1000			12	es a	
	A THE REPORT OF THE PARTY OF TH								
	Vista Homes	la an il			1929			2 9	
	Total			135 1	No:	-	-		₹ 881.00
	ount Chargeable (in words)								E. & O.E
In	dian Rupees Eight Hundred Eighty One Only								
- 5	HSN/SAC	Tax		Cen	tral Tax			te Tax	Total
73	18	Va 7	ue 47.01	Rate 9%	Amount 67.23		ate 9%	Amount	
99				9% 14%		1	9% 9% 4%	67.2	
	Amount (in words) : Indian Burners One Handard This	otal 7	47.01	1	67.23	3		67.2	3 134.46

	HSN/SAC	En lighter to the Alb	Taxable	Central Tax		State Tax		Total	
		12 Jun 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Value	Rate	Amount	Rate	Amount	Tax Amount	
7318 99 99		15	747.01	9% 9% 14%	67.23	9% 9% 14%	67.23	134.46	
		Total	747.01	11	67.23		67.23	134.46	

x Amount (in words): Indian Rupees One Hundred Thirty Four and Forty Six 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.

for Praful Sanitary

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION This is a Computer Generated Invoice

Purchase Order

Page(s) 1 Of 1

02-02-2021 2:16:40 PM

From Company: **Vista Homes**

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

G S T No.: 36AAGFV2068P1ZJ

Supplier Details				
Praful Sanitary	Doc No	74276	180606	
3-6-138/5, Himayat Nagar, Hyde	Doc Date 01-02-2021		21	
	Quote No	Nil		
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	01-02-2021	
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 7424 - Plumbing - CPVC - Clamp - Others - nos China clamps 1/2"	100.00	9.12	45.00	18.00	591.89
2 7424 - Plumbing - CPVC - Clamp - Others - nos China clamps 1"	100.00	10.39	45.00	18.00	674.31
		Total Or	der Value	e	1,266.20

Terms and Conditions :-

Specification /

As per details given in the quotation.

Payment Terms

After Delivery & Production of bill

Tax

Inclusive of all taxes

Delivery Date

Next Day.

Delivery Location Vista Homes

Sy. No. 193, Kapra, Hyd. From ECIL take left in lane opposite MRR school

Phone. Contact: 8790166611

Penality For Delay Nil

Transportation

Transport cost shall be borne by us.

Warranty

Nil

Advance Paid

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Above order for E block generator

use purpose. Nil

Completion Date

Measurment

Security

Nil Nil

Remarks

Accepted the above Terms And Conditions

For Praful Sanitary

For Vista Homes

Authorised Signatory

Date : __/__/___

-Requisition Form

			-iccquisit	1011 1 01111				
Comp	any Name:	Vista Homes	29.01.2021					
Site &	Phase:	Vista Homes Time:				12:30		
Suppli	er:		Req.	No.	1	180606		
Mater	ial required before date:	31.01.21	ID No	o.		63452		
No	Descrip	tion	Size	Quantity	Units	Inward No	Date	
1	МСВ	_	16amps	48 -	No's			
2	МСВ	224	6amps	48	No's			
3	4 Pole Isolator		40amps	10 _	No's			
4	Distribution Boards		6way	15	No's			
5	Distribution Boards		4way	06 -	No's			
6	Nail Camps	14276	1/2"	100	No's	١.		
7	Nail Camps		1"	100	No's			
8					LAP			
9					0.7	L 27:11		
10					1	1 4-6		
Remai	ks: For E-Block Generator	Purpose.			I A.T.	SH PARITY		
Prepared By T.Madhu			Appro	oved by	MARKO	And the second s		
Sign.& Date 31.01.21			Sign.	& Date				
Not	e: On receipt of material at	site write inward number	and date in last	2 columns				

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