## PURCHASE DIVISION Advice for approval for credit to supplier

Date:		16-4	~2 1	P.		Prepar	ed by:		NEH	IA	
PO/WO no.  Supplier Name  Firm/Company  Sl. No.  1  2  3  4  Amount A – Bills  Sl. No. DC .N  1.		742	36			PO / WO Date.		01-02-21			
PO/WO no.  Supplier Name Firm/Company Sl. No.  1 2 3 4 Amount A – Bills Sl. No. DC .N 1. 2.		Praful	San	itan y	+	PO/W	O amount		1,266.		
Firm/Comp	oany	Vista				Projec	t		vista		
			Bil		Bill Date		Bill amount				
1		8	77		17-02-21		21	38 5.00			
									/		
3											
4											
Amount A	– Bills t	otal(Exclud	ing Transp	ort & Hai	mali Charge	es):			385.00		
Sl. No.	DC .N	0		DC. Date	е		MRN	No.	DC matches M	RN	
54890				/		88	277	□ Yes □ No			
2.			2					=	□ Yes □ No		
3.		1		/					□ Yes □ No		
Amount B	Other (	Credits :_Tra	nsportatio	n charges					_		
Amount C -Other Debits :											
Amount D	(D=A+I	3-C) – Amo	unt to be	credited to	the supplie	E		385	.00/-		
Amount E	- PO / V	VO value:							1,266	.20/-	
Amount F -	- Differe	ence (A – E)	: GST-18	%				,	881	1-	
Quantity re	ceived a	s per PO/W	O		☐ Yes ☐ Excess received ☐ Short received ☐ Other (explained below)						
Is differenc	e betwe	en PO / Bill	acceptabl	e?	Yes - No (explained below)						
Excess / she	ort mate	rial received	l		☐ Approved – within acceptable limits ☐ No (explained below)						
Close PO /	O / W?O				to the supplier:  385.00/  1,266.20/  881 /-  Yes = Excess received   Short received = Other (explained below)  4 Yes = No (explained below)  Approved — within acceptable limits = No (explained below)  Yes = No — wait for balance material = No (explained below)  Yes = Rs/- = No						
Advance paid / PDC given (deduct when paying)				□ Yes - Rs. /- □ No							
Payment – due date				22-04-21							
Remarks: Part Bill Final Bill											
				,	1 1						
Approve by	d 1	Purchase Officer	Purch Mana		Procuremen Manager	t	MD	Accounts – receiver of bill	Accountant	Accounts Manager	
Sign:	4	20mai		1	6 APR 29	121					
Date		14/21			weelle.	11/11					

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/-

À	GST INV	VOICE			(OF	RIGIN	IAL FOR	REC	IPIENT)
P	aful Sanitary		Invoi	ce No.		Date	ed		
	6-429/6,SRI SAI TOWER.	PS/2	20-21/877		17-Feb-2021				
St	No.4 HIMAYAT NAGAR			ery Note		· ·	. 05 20		
	YDERABAD STIN/UIN: 36ACWPG4864A1ZG		Invo	ice					
(6)5	ate Name : Telangana, Code : 36			olier's Ref.	Other Reference			3)	
	Mail : prafulsanitary@gmail.com					Cre	dit		950
Bu	yer		Buyer's Order No.				ed		
	sta Homes		74276			1-Feb-2021			
	4-187/3 & 4, IInd Floor, M.G.Road		Despatch Document No.			Delivery Note Da			9
	ecunderabad		Invoice			17-Feb-2021			
_	STIN/UIN : 36AAGFV2068P1ZJ ate Name : Telangana, Code : 36		Despatched through			Destination			
Si	ate Name : Telangana, Code : 36		Self			Kushaiguda			
SI No.	Description of Goods and Services  20mm Pvc Clamp	HSN/SAC	GST Rate	Quantity 65 No:	Rate 9.12	per No:		An	326.04
	Output CGST Output SGST ROUNDING OFF								29.34 29.34 0.28
			2.75	se Mo					
				10-24/ 1777 Loy Nob		7.			= 20 E
			305 E	Pass de Pass		*			
			1 5			210	200		
			100	1 2 2 3		J. ah			1
			8.23	1,0			1 1		

INWARD 2 Dt: ard No.9 Dt: Sign: ceived By

> Total 65 No: ₹ 385.00 E. & O.E

Indian Rupees Three Hundred Eighty Five Only

HSN/SAC Taxable Central Tax State Tax Total Rate Rate Value Amount Amount Tax Amount 3917 326.04 9% 29.34 9% 29.34 58.68 99 9% 9% 99 14% 14% Total 326.04 29.34 29.34 58.68

Tax Amount (in words): Indian Rupees Fifty Eight and Sixty Eight paise Only

Company's PAN

Amount Chargeable (in words)

: ACWPG4864A

<u>Declaration</u>
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		
	Quote No	Nil		
<b>GSTIN</b> 36ACWPG864A1ZG 40077300		<b>Quote Date</b>	01-02-2021	
65526886.	9849624797	SupplyType Supply		the state of the s

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

Rupees: One Thousand Two Hundred Sixty Six and Paise Twenty Only. Part Bill Received @ Bill - 3/2/21 877 - 17/2/21 - 385 > 826-3/2/21

Terms and Conditions :-

As per details given in the quotation. Specification /

After Delivery & Production of bill **Payment Terms** 

Inclusive of all taxes Tax

**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

Bal amt: 881

use purpose.

Completion Date

Nil

Measurment Security

Nil

Remarks

Accepted the above Terms And Conditions

For Praful Sanitary

For Vista Homes

Authorised Signatory

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

-Requisition Form

			-Requi	SHOH FOITH					
om	oany Name:	Vista Homes	Date:			29.01.2021			
ite &	k Phase :	Vista Homes	Time:		12:30				
upp	lier:		Req.			180606			
Aaterial required before date: 31.01.21			ID No.			63452			
No	Descri	ption	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	4way 06 -						
6	Nail Camps	1/2"	100	No's					
7	Nail Camps		3 22	100	No's	1			
8	J				2.0	4			
9					0.2	2 1 2 1 1			
10					0.7	1 12			
ema	irks: For E-Block Generator	Purpose.		To the second se	1 - 21/1				
repared By T.Madhu		Approved by							
ign.& Date		31.01.21	Sig						
No	te: On receipt of material at	site write inward number	and date in la	ast 2 columns.		-			

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