## PURCHASE DIVISION Advice for approval for credit to supplier

Date:		201.	1	Prepar	ed by:					
PO/WO no		2910	1101		VO Date.		HEME	NDRA		
Supplier N		7 76	429			<del></del>	1614	131		
- "-		hone	Sala	PO/W	O amount		10 4	7.1-		
Firm/Comp			s Ll	Projec	t .		- 10 <sub>1</sub> 0	11-		
Sl. No.	Bil	l No.		Bill D	ate		Bill amount	4		
1		102	· · · · · · · · · · · · · · · · · · ·		20111	<u></u>				
2					28/4/6	21	18,	577=		
3			<del></del>							
4						· · · · · · · · · · · · · · · · · · ·		/		
Amount A	- Bills total/	Fychiding Trans	C TT	11.01	<del></del>			<i>(</i>		
Sl. No.	DC .No	Excluding Trans					18.	021/2		
	DC .No		DC. Date	<b>3</b>	MRN No.	,	DC matches MRN			
1.	10 9		28)4	رای	911	19	□Yes □ No			
2.				(	1 7	<del>}                                    </del>	□Yes □ No			
3.		·.	<u> </u>		_		□ Yes □ No	<del></del>		
Amount B	Other Cred	its:_Transportatio	n charges							
Amount C	Other Debi	ts:			· · · · · · · · · · · · · · · · · · ·		<u></u>			
Amount D	(D=A+B-C)	- Amount to be	redited to	the supplies				-		
Amount D (D=A+B-C) – Amount to be credited to the supplier:  Amount E – PO / WO value:						18,0717-				
Amount F - Difference (A - E): GST-18%						18.	0 21-			
			% 				•			
	ceived as pe			Yes   Excess received   Short received   Other (explained below)						
Is differenc	e between P	O / Bill acceptabl	e?	□ 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 pa	id / PDC giv	ven (deduct when	paying)	□ Yes - Rs.	/- p-No					
Payment -					1 (1					
Remarks:		1 - 0		6	15/21					
·		Latur P	20/=		v.					
Annroye	4 70 3			1						
Approved by	d Purci			rocurement Manager		Accounts - eceiver of	Accountant	Accounts Manager		
Sign:			2	Q ADD code		bill				
Date	1/	$\forall + -$	1/2	9 APR 20/1						
Notes: 1 In	Case amoust	to be gradited to	7.							

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/-

3-	6-429/6,SRI SAI TOWER,			1	ce No.			Dat	ed			
St	St.No.4 HIMAYAT NAGAR					PS/21-22/ 102				28-Apr-2021		
H`	YDERABAD			Deliv	ery Not	te		<del>                                     </del>	<u> </u>	<del>-</del>		
G	STIN/UIN: 36ACWPG4864A1ZG			invo	ice			1				
St	ate Name:Telangana. Code:36				lier's R	ef	<del></del>	Oth	or Poto	rence(s)		
==-	Mail: prafulsanitary@gmail.com									rence(s)		
	iyer			Binin	r's Ord				dit			
Sι	ımmit Sales LLP			1		er N	٥.	Dat				
5-	4-187/3&4, IInd Floor, M.G Road			7642				16-	<u>Apr-20</u>	21		
Se	cunderabad			Desp	oatch D	ocur	nent No.	Del	ivery No	te Date		
G:	STIN/UIN: 36ACQFS2044C1Z7			Invo				28-	Apr-20	21		
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No.	Goods and Services			Rate	- Cacin	Lity	Jale	per	Disc. %	Amount		
1	15mm Brass Ball Valve	<del>                                     </del>		,,,,,,	ļ		<del>/</del>	<del></del>	<b></b>			
2	15mm Brass Ball Cock Set	8481		18 %	10 N	No:Y	373.00	) No:	35 %	2,424.5		
3	25mm Extension to	8481	۱	18 %	10 N	No:	/_338.90			3,050.10		
	25mm Extension Nipple	8481		18 %	70 N	VO!				3,360.0		
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5	600mm Pvc Connection	3917	7	18 %	40 1	MA:	80.00			3,600.0		
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_			Valu		Rate	tral 7		Sta	te Tax	Total		
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	917 5			30.00	9%		259.20	9% 9%	1,119			
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135					14%			14%				
⊢		Total	15,31	4.60		1.	378.32		1,378	.32 2,756.6		
Ta	x Amount (in words): Indian Rupees Two Thousand Seven He								.,0.0	.02 2,730.0		
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٧٧	e declare that this invoice shows the actual price of the goods											
<u> </u>	scribed and that all particulars are true and correct.	L.								uthorios d Commission		
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SUMMER GALES LLP

Contried by:

## Purchase Order

Page(s) 1 Of 1

16-04-2021 3:51:51 PM

Original / Office

16.04.21

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	Doc No	76429	168588	
3-6-138/5, Himayat Nagar, Hyd	Doc Date	16-04-2021		
		Quote No	Nil	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	16-04-202	21
65526886.	9849624797	SupplyType	Supply	

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Qty	Rate	Dis%	GST	Amount
10.00	373.00	35.00	18.00	2,860.91
10.00	305.00	0.00	18.00	3,599.00
70.00	60.00	20.00	18.00	3,964.80
50.00	90.00	20.00	18.00	4,248.00
40.00	80.00	10.00	18.00	3,398.40
/.	Total Order Value			18,071.11
	10.00 10.00 70.00 50.00 40.00	10.00 373.00 10.00 305.00 70.00 60.00 50.00 90.00 40.00 80.00	10.00 373.00 35.00  10.00 305.00 0.00  70.00 60.00 20.00  50.00 90.00 20.00  40.00 80.00 10.00	10.00       373.00       35.00       18.00         10.00       305.00       0.00       18.00         70.00       60.00       20.00       18.00         50.00       90.00       20.00       18.00         40.00       80.00       10.00       18.00

Terms a	and Cond	litions :-

Specification /

As per details given in the quotation.

**Payment Terms** 

Within 30 days of delivery.

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

Penality For Delay

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 Nil

Security Remarks

For Summit Sales LLP

**Authorised Signatory** 

Accepted the above Terms And Conditions

For Praful Sanitary

	 9 1
	 <del></del>
Name:	

Name :	
--------	--

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

Date: 14.04.2021 Time: 16.00

Material required before date: Req. No. 168588

SUMMIT SALES LLP

SUMMIT HOUSING LLP

ID No. 65398 No Description Size Quantity CP- Wall Mixture Inward No Units 1 Date 20 CP-Long Body 2 nos 16 CP- Short Body 3 nos 6 CP- Shower Arm 6428 4 nos 20 5 CP-Shower Head nos 20 CP-Pillar Cock 6 nos 20 nos 7 CP- Angle Cock 120 CP -Extension nippal 8 nos 1/2"x1" 70 GI- Ball Value 9 nos 1/2" 10 GI-Ball Cock nos 1/2" 10 Sanitary Health Faucet 11 nos 30 Extension Nippal 12 nos 1 1/2" 50 **PVC Connection** 13 nos 2' 40 14 nos

Requisition Form

Remarks: FOR STOCK MAINTANENCE PURPOSE

Company Name:

Site & Phase:

Supplier

Prepared By BHAVANI Sign & Date 14.4.2021 Note: On receipt of material at site write inward number and date in last 2 columns. Sign. & Date