PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	29/4/21	Prepared by:	HEMENDRA
PO/WO no.	76656	PO / WO Date.	23/4/21
Supplier Name	Prafful Sanitary	PO/WO amount	29131/-
Firm/Company	SSLLP	Project	ShLLP
Sl. No.	Bill No.	Bill Date	Bill amount
1	101	28/4/21	29,131/-
2			
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			29,131/-

Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN
1.	101	28/4/21	91617	☑ Yes ☐ No
2.				☐ Yes ☐ No
3.				☐ Yes ☐ No

Amount B –Other Credits : Transportation charges	—
Amount C –Other Debits :	—
Amount D (D=A+B-C) – Amount to be credited to the supplier:	29,131/-
Amount E – PO / WO value:	29,131/-
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.____/- ☑ No
Payment – due date	6/4/21
Remarks:	Deliver 2d/2

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	MD	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	[signature]		[signature] 29 APR 2021				
Date							

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/-

GST INVOICE

(ORIGINAL FOR RECIPIENT)

Praful Sanitary
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

Invoice No. **PS/21-22/ 101**	Dated **28-Apr-2021**
Delivery Note **Invoice**	
Supplier's Ref.	Other Reference(s) **Credit**
Buyer's Order No. **76656**	Dated **23-Apr-2021**
Despatch Document No. **Invoice**	Delivery Note Date **28-Apr-2021**
Despatched through **Self**	Destination **Cherlapally**

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

Sl No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**Waste Coupling Half Thread**	8481	18 %	**24 No:**	275.00	No:	25 %	**4,950.00**
2	**CP Grating Square (Plain)**	7326	18 %	**50 No:**	179.00	No:	35 %	**5,817.50**
3	**40mm Extension Nipple**	8481	18 %	**100 No:**	90.00	No:	20 %	**7,200.00**
4	**25mm Extension Nipple**	8481	18 %	**70 No:**	60.00	No:	20 %	**3,360.00**
5	**450mm Pvc Connection**	3917	18 %	**60 No:**	70.00	No:	20 %	**3,360.00**
								24,687.50
	Output CGST							**2,221.88**
	Output SGST							**2,221.88**
	Less : ***ROUNDING OFF***							**(-)0.26**
	Total			**304 No:**				**₹ 29,131.00**

MODI PROPERTIES PVT. LTD. SECUNDERABAD INWARD No. 8007 Date 29/4 Sign

Amount Chargeable (in words) *E. & O.E*
Indian Rupees Twenty Nine Thousand One Hundred Thirty One Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
8481	15,510.00	9%	1,395.90	9%	1,395.90	2,791.80
7326	5,817.50	9%	523.58	9%	523.58	1,047.16
3917	3,360.00	9%	302.40	9%	302.40	604.80
99		9%		9%		
99		14%		14%		
Total	**24,687.50**		**2,221.88**		**2,221.88**	**4,443.76**

Tax Amount (in words) : **Indian Rupees Four Thousand Four Hundred Forty Three and Seventy 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.

PRAFUL SANITARY HIMAYATNAGAR HYDERABAD
for Praful Sanitary
Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

INWARD
16272 Dt: 28/4/21
91617 Dt: 28/4/21
Sign: 84
SUMMIT SALES LLP

Certified by:
Stores Manager

Purchase Order

 23-04-2021 2:49:54 PM

76656
16.04.21 1:14:52

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**	76656	168609
	Doc Date	23-04-2021	
	Quote No	Nil	
	Quote Date	23-04-2021	
	SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

	Item Name	Qty	Rate	Dis%	GST	Amount
1	7047 - Plumbing - CP - Waste coupling - 1/2 thread - nos	24.00	275.00	25.00	18.00	5,841.00
2	7040 - Plumbing - CP - Sq. jali with hole - 6 In x6 In - nos	50.00	179.00	35.00	18.00	6,864.65
3	7028 - Plumbing - CP - Extension Nipple - other - nos *1 1/2"*	100.00	90.00	20.00	18.00	8,496.00
4	7026 - Plumbing - CP - Extension Nipple - 1/2 In - nos *1"*	70.00	60.00	20.00	18.00	3,964.80
5	10048 - Plumbing - PVC - PVC Connection - 18 in - nos	60.00	70.00	20.00	18.00	3,964.80
					Total Order Value . . .	**29,131.25**

Rupees : Twenty Nine Thousand One Hundred Thirty One and Paise Twenty Five Only.

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 Summit Housing LLP
Cherlapally,Behind Kingston PG college, Hyderabad
Phone. 9618244433, Hamendra

Penality For Delay Nil

Transportation Extra.

Warranty Nil

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

Security Nil

Remarks

For ***Summit Sales LLP***
Authorised Signatory

Name : ____________

Accepted the above Terms And Conditions
For ***Praful Sanitary***

Name : ____________

Date : __/__/____

Requisition Form

Company Name:	SUMMIT SALES LLP	Date:	20.04.2021
Site & Phase :	SUMMIT HOUSING LLP	Time:	04:00
Supplier		Req. No.	168609
Material required before date:		ID No.	65616

No	Description	Size	Quantity	Units	Inward No	Date
1	CP- Wall Mixture		25	nos		
2	CP- Long Body		15	nos		
3	CP-Short Body		10	nos		
4	CP-Pillar Cock		20	nos		
5	CP-Angle Cock		80	nos		
6	CP-Wash Basin Waste Coupling		24	nos		
7	Health Faucet		30	nos		
8	CP Jail with Hole		50	nos		
9	Extension Nipple	1 1/2	100	nos		
10	Extension Nipple	1/2	70	nos		
11	PVC Connection	18"	60	nos		

7665?

76656

Remarks:For Stock Maintenance Purpose

Prepared By	BHAVANI		APPROVED BY
Sign.& Date	20.4.2021	Sign. & Date	21 APR 2021

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

SOHAM MODI
MANAGING DIRECTOR