PURCHASE DIVISION Advice for approval for credit to supplier

		1								
Date:	,	0521		Prepare	d by:		Dozah	babar		
PO/WO no	0.	16805	=	PO / WO Date.			130012			
Supplier N	Hour	PO/WO	amount		14.103.95					
Firm/Com	oany	Dietatton	w	Project			Dist	attown?		
Sl. No.	Bill No.			Bill Dat	e		Bill amount	11111111		
1	PS/21	-22/124		3/	5/2	1	14,104-60			
2	13-17-1			(/	17,109			
3					•	ISSNER MARKET	/			
4							/			
Amount A	- Bills total(Exclu	ding Transport & I	Hamali Charg	ges):			14,100	1-0		
Sl. No.	DC.No	DC. D	Pate		MRN	No.	DC matches M			
1.	1		1		91	7% V	☐ Yes □ No			
2.					-		□ Yes □ No			
3.							□ Yes □ No			
Amount B	Other Credits :_T	ransportation charg	ges/Charges					7		
Amount C	Other Debits:									
Amount D	(D=A+B-C) – Am	ount to be credited	to the suppli	er:		14,104-00				
Amount E	PO / WO value:				3		14.102	.95		
Amount F	- Difference (A – I	E): GST-18%					17100			
Quantity re	ceived as per PO /	WO	Yes 🗆	Excess re	ceived [Short received	l Other (explain	ined below)		
Is difference	e between PO / Bi	Il acceptable?	₩ Yes □	No (expla	ined bel	ow)				
Excess / she	ort material receive	ed	Appro	☐ Approved — within acceptable limits ☐ No (explained below)						
Close PO /	W?O		Yes 🗆	Yes □ No – wait for balance material □ No (explained below)						
Advance pa	id / PDC given (de	educt when paying))	Rs <u>.</u>	D No					
Payment -	due date	H-14-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	1=	7 J.	21					
Remarks:				/ (7	/	,		10		
Approve	d Purchase	Purchase	Procuremen	t N	I D	Accounts –	Accountant	Accounts		
by	Officer	Manager	Manager		,	receiver of bill		Manager		
Sign:		DA				OIII				
Date		1000								
		111111								

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 IN	VOICE			(0	ORIGII	NAL FOR	R RECIPIENT)
Praful Sanitary		Invo	ice No.		Dat	ed	
3-6-429/6,SRI SAI TOWER,		PS/	21-22/ 12	4	3-1	/lay-202	21
St.No.4 HIMAYAT NAGAR			ery Note			,	
HYDERABAD		Inve	oice				
GSTIN/UIN: 36ACWPG4864A1ZG			plier's Ref.		Oth	er Refer	rence(s)
State Name: Telangana, Code:36 E-Mail:prafulsanitary@gmail.com					0.000	edit	(-/
Buyer		Buve	er's Order I	No.	Dat		
/ista Homes		768				Apr-20	24
5-4-187/3 & 4, IInd Floor, M.G.Road			patch Docu	ıment No		ivery No	
Secunderabad			oice	arriorit 140.			
GSTIN/UIN : 36AAGFV2068P1ZJ			patched th	rough	3-N	May-202	41
State Name : Telangana, Code : 36				lough			
Description of	THEN/SAC	Self		Boto		shaigu	
Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
500mm Orissa Pan (White)	6910	18 %	5 No	1,855.0	0 No	30 %	6,492.50
Pvc Long Bend	3917	18 %			0 No:		420.00
Pvc Flush Tank (White)	3922	18 %			100000		5,040.00
T Ve Flush Fank (White)				,	-		11,952.50
0	_						
Output CGST							1,075.73
Output SGS1							1,075.73
ROUNDING OFF	-					200	0.04
			la se e				
		8			13.7%		
			47 87 17				
						As .	
		8 8					
A special form that it is		E 10 11				1,000	
							1.8
			11 22 80	W 11 62 908			
		8					
		9		8 5 8			e de la carrier announce molt le se
	9		s _ s	150 n			. I
Tota	1		15 No		-	2 10 10 10 100	= 44 404 00
Amount Chargeable (in words)		8	15 140				₹ 14,104.00 E. & O.E
ndian Rupees Fourteen Thousand One Hundred Four Or	nly	11	n n	a residence			# # # 35 N W 38
HSN/SAC		able	Central			ate Tax Amour	Total
2010		lue 92.50	Rate A	mount 584.33	Rate 9%	584	
6910 3917		20.00	9%	37.80	9%		.80 75.60
3922		40.00	9%	453.60	9%	453	
99			9%	-	9%		
99 99	Total 11.9	52.50	14%	,075.73	9% 14%	1,07,5	.73 2,151.46

Company's PAN

: ACWPG4864A

for Praful Sanitary

Declaration
We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

SUBJECT TO HYD

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION This is a Computer Generated Invoice

award No: 25909 RN No: Sign: eceived By

Vista Homes



Purchase Order

Page(s) 1 Of 1

30-04-2021 3:16:15 PM

06.05.21 4:35:36

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	76845	180778	
3-6-138/5, Himayat Nagar, Hyderab	Doc Date	1		
	Quote No	Nil		
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	31-01-2018 Supply	
65526886.	9849624797	SupplyType		

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 7304 - Plumbing - sanitary - Orissa pan - 20 In - nos 20004 white	5.00	1,855.00	30.00	18.00	7,661.15
2 10185 - Plumbing - PVC - Elbow - NA - Nos long bend	5.00	120.00	30.00	18.00	495.60
3 7300 - Plumbing - sanitary - Flush tank conceled - NA - nos	5.00	1,440.00	30.00	18.00	5,947.20
Dupos : Fourtoon Thousand One Hundred Three and Daire Nie	, ,	Total Or	der Valu	e	14,103.95

Rupees: Fourteen Thousand One Hundred Three and Paise Ninty Five Only.

Terms and Conditions :-

Specification /

As per details given in the quotation.

Payment Terms

After Delivery & Production of bill

Tax

GST included in above price.

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

Nil

Other Terms

We reserve the right items not confirming to qlty & specs. Breakage in your account. Above order for E 101,211,311,102,106 IWC Flats purpose.

Completion Date

Measurment

Nil Nil Nil

Security

Remarks

For Vista Homes

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary**

	1	
	$1//\times)$	
Name :	1 22	-

Date : __/__/

Requisition Form

	pany Name:	Vista Homes			Date			28.04.21		
Site	& Phase :	Vista Homes			Time	:		16:00		
Supp	olier:		Rec					180778		
Mate	erial required before date:		30.04.21	04.21 ID			-	65813		
No	No Description			Size		Quanti ty	Units	Inward No	Date	
1	Indian WC				std	5	No's			
2	PVC flush tank	710	4 <		std 5					
3	2 000			std 5			No's			
4										
5										
6										
7								,		
8										
9							A	(CO)		
10						X	7/60	-01		
Rem	arks: For E-111,211,311,10	2,106 india	WC fixing	purpose.			las.	MAR 3051		
Prep	ared By	Md.Khad	ar		Approved	by	HARCHASEI			
Sign	.& Date	28.04.21			Sign. & D	ate	1 8	PRAGER PURIL		
Not	te: On receipt of material at	site write in	ward number	r and date	in last 2 col	umns.	\SI.	MAIN		
				Pagnici	tion Form					
Com	pany Name:	Vista Hor	nes	Requisi	Date					
	& Phase :	Vista Hor	nes	Time:						
Supp	olier				Req. No.					
Mate	erial required before date:	1	22.02	.21	ID No.					
No	Descr	iption			Size	Quantity	Units	Inward No	Date	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
Rem	arks	****								

Approved by

Sign. & Date

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

Md.Khadar 20.04.21

Prepared By

Sign.& Date