PURCHASE DIVISION

Advice for approval for credit to supplier

Date:	17-6-21	Prepared by:	M.ANIL
PO/WO no.	77150	PO / WO Date.	14-5-21
Supplier Name	Praful sanitary	PO/WO amount	11,869.33/-
Firm/Company	MRM LLP (Murkampally)	Project	MRM LLP
Sl. No.	Bill No.	Bill Date	Bill amount
1	PS/21-22/176	24-06-21	12,189/-
2			
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			12,189/-

Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN
1.			92378	☐ 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:	12,189/-
Amount E – PO / WO value:	11,869.33/-
Amount F – Difference (A – E): GST-18%	-319.67/-

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	21-6-21
Remarks:	

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:			APPROVED 17 JUN 2021 MINISH PARIKH MANAGER PROCUREMENT				
Date	17/6/21	17/6					

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

Buyer
Modi Reality Murharipally LLP
5-4-187/3 & 4, IInd Floor
Soham Mansion, M G Road
Secunderabad.
GSTIN/UIN : 36ABJFM5257F1Z3
State Name : Telangana, Code : 36

Invoice No. **PS/21-22/ 176**	Dated **24-May-2021**
Delivery Note **Invoice**	
Supplier's Ref.	Other Reference(s) **Credit**
Buyer's Order No. **77150**	Dated **15-May-2021**
Despatch Document No. **Invoice**	Delivery Note Date **24-May-2021**
Despatched through **Self**	Destination **NRK Biotech**

Sl No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**Single Piece Closet S Trap (White)**	6910	18 %	**1 No:**	15,475.00	No:	35 %	**10,058.75**
2	**Teflon Tape**	3919	18 %	**10 No:**	20.00	No:	10 %	**180.00**
3	**15mm Cpvc Thread Plug**	3926	18 %	**4 No:**	8.92	No:	47.10 %	**18.87**
4	**600mm Pvc Connection**	3917	18 %	**1 No:**	80.00	No:	10 %	**72.00**
								10,329.62
	Output CGST							**929.67**
	Output SGST							**929.67**
	ROUNDING OFF							**0.04**
	Total			**16 No:**				**₹ 12,189.00**

INWARD	
Inward No: 576	Dt: 27/05/21
MRN No: 92378	Dt: 11:00
Received By:	Sign:
Genome Valley Discovery Center Pvt. Ltd.	

Amount Chargeable (in words)
Indian Rupees Twelve Thousand One Hundred Eighty Nine Only

E. & O.E

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

for Praful Sanitary

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

MODI PROPERTIES PVT. LTD. SEC'BAD
INWARD No. 80196
Date 3/6
Sign.

GST INVOICE

(Tax Analysis)

(ORIGINAL FOR RECIPIENT)

Invoice No. **PS/21-22/ 176**

Dated **24-May-2021**

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

Party : **Modi Reality Murharipally LLP**
5-4-187/3 & 4, IInd Floor
Soham Mansion, M G Road
Secunderabad.
GSTIN/UIN : 36ABJFM5257F1Z3
State Name : Telangana, Code : 36

HSN/SAC	Taxable Value	Central Tax		State Tax		Total Tax Amount
		Rate	Amount	Rate	Amount	
6910	10,058.75	9%	905.29	9%	905.29	1,810.58
3919	180.00	9%	16.20	9%	16.20	32.40
3926	18.87	9%	1.70	9%	1.70	3.40
3917	72.00	9%	6.48	9%	6.48	12.96
99		9%		9%		
99		14%		14%		
Total	**10,329.62**		**929.67**		**929.67**	**1,859.34**

Tax Amount (in words) : **Indian Rupees One Thousand Eight Hundred Fifty Nine and Thirty Four paise Only**

INWARD
Inward No: 576 Dt: 27/05/21
MRN No: Dt: 11 '00
Received By: Sign:
Gemms Valley Discovery Center Pvt. Ltd.

MODI PROPERTIES PVT. LTD. SEC'BAD
INWARD No. 86796
Date 31.5
Sign.

PRAFUL SANITARY HIMAYATNAGAR

for Praful Sanitary

Authorised Signatory

Purchase Order

 31-05-2021 7:47:58 AM

77150
06.05.21 4:35:38

From Company : **Modi Reality Muraharipally LLP**
5-4-187/3&4, II nd floor, SOham Mansion, MG Road, Secunderabad-50003
G S T No. : 36ABJFM5257F1Z3

Supplier Details			
Praful Sanitary 3-6-138/5, Himayat Nagar, Hyderabad.	**Doc No**	77150	186005
	Doc Date	14-05-2021	
	Quote No	Nil	
GSTIN 36ACWPG864A1ZG 40077300	**Quote Date**	14-05-2021	
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	10233 - Plumbing - sanitary - EWS + seat cover set - NA - Nos *floor mount*	1.00	15,475.00	35.00	18.00	11,869.33
					Total Order Value . . .	**11,869.33**

Rupees : Eleven Thousand Eight Hundred Sixty Nine and Paise Thirty Three Only.

Terms and Conditions :-

Specification /	All items shall be of Hindware brand
Payment Terms	After Delivery & Production of bill
Tax	Inclusive of all taxes
Delivery Date	Next Day.
Delivery Location	NRK Biotech . Phone. .
Penality For Delay	Nil
Transportation	Transport cost shall be borne by us.
Warranty	Nil
Advance Paid	Nil
Other Terms	We reserve the right to reject items not conforming to quality and specifications. Above order for Site use purpose
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	

For ***Modi Reality Muraharipally LLP***
Authorised Signatory

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

Name : ____________

Name : ____________

Date : __/__/____

Requisition Form

Company Name:	NRK BIO-TECH	Date:	14.05.2021
Site & Phase :	NRK BIO-TECH	Time:	12:00
Supplier		Req. No.	186005
Material required before date:		ID No.	

No	Description	Size	Quantity	Units	Inward No	Date
1	**WC SET - Floor mount (White)**	STD	01	No		
2						
3						
4						
5						
6						
7						
8						
9						
10						

Remarks: For replacing at toilet at NRK site purpose.

Prepared By	Mallikarjun.B	Approved by	K.Narsinga rao
Sign.& Date	14.05.2021	Sign. & Date	14.05.2021

APPROVED 31 MAY 2021 P. PRABHAKAR Sr. MANAGER-PURCHASE

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

Requisition Form

Company Name:		Date:	
Site & Phase :		Time:	
Supplier		Req. No.	
Material required before date:		ID No.	

No	Description	Size	Quantity	Units	Inward No	Date
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Remarks:

Prepared By		Approved by	
Sign.& Date		Sign. & Date	

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