## **PURCHASE DIVISION** Advice for approval for credit to supplier





30/10/2021		Prepared by:			Kavitha				
PO/WO no. 80454			PO/Wo	PO / WO Date.					
Supplier Name Danaly Santage			PO/WO	PO/WO amount			/_		
SI. No.  Bill No.		Project			23,895/-				
SI. No. Bill No.			Bill Date			NGH : Bill amount			
1	PS121-25/5	スク .	11/0	121		21 055/			
2	- 1x3(8(, 801.)	<u> </u>	- 11.79	181		26,255/-			
3									
4		,							
Amount A	- Bills total(Excluding Tran	sport & Ham	nali Charges):			261255	c/_		
Sl. No. DC .No DC. Date				MRN No.			RN		
1.		-	* *************************************	9 6599			<u>i</u>		
2.						□ Yes □ No			
3.						□ Yes □ No			
	-Other Credits: Transporta	tion charges	***	<del></del>		2360			
Amount C	Other Debits:					<u> </u>			
L	(D=A+B-C) - Amount to b	e credited to	the supplier:						
Amount E	- PO / WO value:			·		23895	· •		
Amount F	- Difference (A - E): GST-	18%			** ** **	2,360/	_		
Quantity re	eceived as per PO/WO		rs Yes □ Excess re	eceived 🗆 Sl	hort received	□ Other (explain	ned below)		
Is difference	ce between PO / Bill accepta	ible?	□-Yes □ No (expl	ained below	/)				
Excess / sh	ort material received	☐ Approved — within acceptable limits ☐ No (explained below)							
Close PO	W?O		res □ No – wa	it for balanc	e material 🗆	No (explained b	elow)		
Advance p	aid / PDC given (deduct wh	U Yes – Rs. /- U No							
Payment -	due date		1/10/202	) ]					
Remarks:	Transporta	1000 0	houses es	+ <del>1</del>					
		<del>LUM U</del>	No gen E	<u> </u>			· · · · · · · · · · · · · · · · · · ·		
Approve	1	chase P	PROVED		Accounts – receiver of	Accountant	Accounts Manager		
Sign:	varilha	31	OCT 2021		bill				
Date	30/10/21.		IISH PARIKH		<del></del>				
Notes: 1. Ir	case amount to be credited	to suppliar	R PRODUREME	Penot mate	h prepare IV	for dobit an area	1:4 0 4 4 1		

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/-

for Praful Sanitary

Authorises Signato v

aful Sanitary 3-429/6,SRI SAI TOWER,	<u> </u>		oice No.			Date			
DERARAD	r. · · · · · · ·	Deli	21-22/ very No			17-	Sep-21		
STIN/UIN: 36ACWPG4864A1ZG alte Name : Telangane, Code : 36		Reference No. & Date.  Buyer's Order No.				Oth	er Refer	ences	
viair : pretuisanitary@gmail.com							9849497484 Dated		
/er (Bill to)									
di Reality Pocharam LLP -183/3&4, lind Floor		80454				ep-21			
ham Mansion, M G Road		1 1	etch D	oc No.		j.	very Not	.e Date	
cinderabad,			olce patched	throug	nh .		Sep-21		
ITIN/UIN : 36ABIFM1836H1Z7 Ite Name : Telangana, Code : 36	,	1 '	ods Ve		•	í		ts, Poch	aram
						· · · · · · · ·			***********
Description of Goods and Services	HSN/SA	C GST Rate		itity	Rate	per	Disc. %	Amou	ınt
50mm Hdpe Pipe 6 Kg	2047		1						
semin respect the original	3917	18 %	250 N	vitrs	90.00	Mtrs	10 %	20,25	50.00
Output CGS	rl		1				} }	2.01	02.50
Output SGS:	r]						1 1		02.50
Transport Charges @ 18%	99	18 %	6			1			00.00
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int Chargeable (in words)	<u> </u>	1	250	vitrs				₹ 26,25	
an Rupees Twenty Six Thousand Two Hundred Fifty	Five Only	,						E.	& O.
HSN/SAC		axable	Cer	ntral Ta			ate Tax		otal
	i 1	/alue	Rate	Amo		Rate	Amou	nt Tax A	Аточг
		250.00	9%	, 1,1,2.					
	20	,250.00 ,000.00	9% 9%		22.50 80.00	9% 9%	1,822 180		645.0 360.0
	20			18				0.00	645.0 360.0

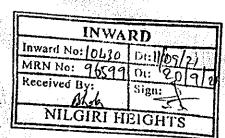
Company's PAN

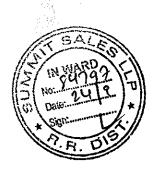
: ACWPG4864A

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

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice





Page(s) 1 Of 1

09-09-2021 5:19:01 PM



08.09.21

Modi Realty Pocharam LLP From Company:

5-4-183/3&4, II nd Floor, Soham Mansion, MG Road, Secunderabad-50666

G S T No.: 36ABIFM1836H1Z7

**Supplier Details** 181690 80454 Doc No Praful Sanitary 08-09-2021 3-6-138/5, Himayat Nagar, Hyderabad. Doc Date NIL **Quote No** 08-09-2021 **Quote Date** 40077300 GSTIN 36ACWPG864A1ZG Supply SupplyType 9849624797 65526886.

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST		ount
1 7102 - Plumbing - HDPE - Pipe - 6Kgs pressure - 2 In - mtrs	250.00	90.00	10.00	18.00	23	,895.00
	<u>'</u>	Total O	rder Valu	e	23	,895.00

Rupees: Twenty Three Thousand Eight Hundred Ninty Five Only.

Terms and Conditions :-

Specification /

All items shall be of 'Premeir' brand

**Payment Terms** 

Within 30 days of delivery.

VAT included in above price.

**Delivery Date** 

Within 3 days

**Delivery Location** 

Nilgiri Heights

pocharam

Phone. .9849497484

Nil **Penality For Delay** 

**Transportation** 

Extra.

Warranty

Nil

Advance Paid

Nil

Other Terms

We reserve the right items not confirming to qlty & specs. Breakage in your account. Above order for Block b to nighbour land manhole for rainwater removing through soughth south comp. wall side purpose.

Completion Date

Nil

Measurment Security

Nil

Remarks

For Modi Realty Pocharam LLP

**Authorised Signatory** 

Accepted the above Terms And Conditions For Praful Sanitary

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

			Requi	sition F	orm				
Company Name: Modi Realty Pochar				Date:			03.09.2021		
		Niligiri H	Niligiri Heights				15.10 PM		
Supp	lier:			Req. 1	No.		181690		
Mate	rial required before d	ate:	07.09.2021	ID No	).		69053		
No		Description		Size	Quantity	Units	Inward No	Date	
1	HDPE Pipe - 6 kg/ cm2			0mm	250	Meters	3		
2									
3									
4									
5				~~~					
6		5	W'						
7		X							
8		<u>4°</u>							
9									
10									
11							- Marie Mari		
Rem	arks: From Block - B	to neighbour lan	d Manhole for rainwa	iter remov	ring through sou		C		
Prepared By Vijay Raj		-	Appı						
Sign	Sign.& Date 03.09.2021		21	Approved by Sign. & Date  Sign. & Date					
No	te: On receipt of mate	erial at site write	inward number and d	ate in last	2 columns.		SEP LOUR ON AR SE	3	