PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	12/11/21	Prepared by:	Prabhakar
PO/WO no.	79859	PO / WO Date.	05/8/21
Supplier Name	Prafull Sanitary	PO/WO amount	371.70
Firm/Company	Vesta Homes	Project	Vesta Homes
Sl. No.	Bill No.	Bill Date	Bill amount
1	481	23/8/21	372-00
2			
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			372-00

Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN
1.			75517	☑ 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:	372-00
Amount E – PO / WO value:	371.70
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	15/11
Remarks:	

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:							
Date		12/11					

APPROVED
14 NOV 2021
MINISH PARIKH
MANAGER PROCUREMENT

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 (Bill to)
Vista Homes
5-4-187/3 & 4, IInd Floor, M.G.Road
Secunderabad
GSTIN/UIN : 36AAGFV2068P1ZJ
State Name : Telangana, Code : 36

Invoice No. **PS/21-22/ 461**	Dated **25-Aug-21**
Delivery Note **Invoice**	
Reference No. & Date.	Other References **Credit**
Buyer's Order No. **79859**	Dated **21-Aug-21**
Dispatch Doc No. **Invoice**	Delivery Note Date **25-Aug-21**
Dispatched through **Auto**	Destination **Kushaiguda**

Sl No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**15x50mm G I Nipple**	7307	18 %	**50 No:**	9.00	No:	30 %	315.00
	Output CGST							28.35
	Output SGST							28.35
	ROUNDING OFF							0.30
	Total			**50 No:**				**₹ 372.00**

SUMMIT SALES LLP R.R. DIST. IN WARD No: 8676 Date: 1/11 Sign:

INWARD
Inward No: 26038 Dt: 25/8/21
GRN No: 9557 Dt: 25/8/21
Received By: Raman Sign: 25/8/21
Vista Homes

Amount Chargeable (in words)
Indian Rupees Three Hundred Seventy Two Only

E. & O.E

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
7307	315.00	9%	28.35	9%	28.35	56.70
99		9%		9%		
99		14%		14%		
Total	**315.00**		**28.35**		**28.35**	**56.70**

Tax Amount (in words) : **Indian Rupees Fifty Six and Seventy 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 HYD-29.
for Praful Sanitary

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

Purchase Order

 21-08-2021 1:08:00 PM

79859
13.08.21 2:25:58

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 3-6-138/5, Himayat Nagar, Hyderabad. **GSTIN** 36ACWPG864A1ZG 40077300 65526886. 9849624797	**Doc No**	79859	180850
	Doc Date	20-08-2021	
	Quote No	NIL	
	Quote Date	18-08-2021	
	SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

	Item Name	Qty	Rate	Dis%	GST	Amount
1	7069 - Plumbing - GI - Nipple - other - nos 1/2"	50.00	9.00	30.00	18.00	371.70
					Total Order Value . . .	**371.70**

Rupees : Three Hundred Seventy One and Paise Seventy 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	Vista Homes Sy. No. 193, Kapra, Hyd. From ECIL take left in lane opposite MRR school Phone. Contact: Mr. Khader - 7893844733
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 B block loft tank fixing purpose
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	

For *Vista Homes*
Authorised Signatory

21/8/21

Name : ________

Accepted the above Terms And Conditions
For *Praful Sanitary*

Name : ________

Date : __/__/____

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Requisition Form

[Company N]ame:	Vista Homes		
[Site & P]hase :	Vista Homes	Date:	18.08.21
[Su]pplier:		Time:	12:36
Material required before date:	22.08.21	Req. No.	180850
		ID No.	68553

No	Description	Size	Quantity	Units	Inward No	Date
1	**CPVC Brass Elbow**	3/4"x1/2"	40	No's		
2	**CPVC MTA**	3/4"x1/2"	40	No's		
3	CPVC Elbow 79853.	3/4"x1/2"	40	No's		
4	Cpvc Brass Tee	3/4"x1/2"	40	No's		
5	Cpvc plain Tee	3/4"x1/2"	40	No's		
6	Cpvc reducer	3/4"x1/2"	40	No's		
7	GI Nipple 79859.	1/2"	50	No's		
8						
9						
10						

Remarks: For E-Block loft tank fixing purpose.

Prepared By	T.Madhu	Approved by	APPROVED 21 AUG 2021 MINISH PARIKH MANAGER PROCUREMENT
Sign.& Date	18.08.21	Sign. & Date	

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

Requisition Form

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

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

Remarks: For F-Block Cellar Ceiling plastering work purpose.

Prepared By	T.Madhu	Approved by	
Sign.& Date	09.02.21	Sign. & Date	

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