PURCHASE DIVISION Advice for approval for credit to supplier



Date:	1711			Prepare	ed by:				
PO/WO no.	13/11/21			PO / WO Date.			Sadhana.		
Supplier Name		057	<u> </u>	PO/WO amount			28/09/21		
Firm/Company	Prof		nitary.				13,58	<u> </u>	
Sl. No.	Bill No.	MCS	<u> </u>	Project			Green		
1	Dill No.			Bill Da	te .	<u> </u>	Bill amount	S LOO	
2	69.	4	-	296	10/21		17 50	\ <u></u>	
					10121		13,58	33/-	
3			-		. <u> </u>				
4				······································					
Amount A - Bills	total(Excluding	Transport & F	lamali Charg	es):					
Sl. No. DC .1		DC. D			MRN No.		13,58		
1.	`/				MIKIN NO.		DC matches N		
2.	7-			 -	, /		□ Yes □ No		
3.		-					□ Yes □ No		
Amount B -Other	Credite : Tropen		·				□ Yes □ No	······································	
Amount C -Other			₴s —————				-		
							_		
Amount D (D=A+		o be credited	to the supplie	er:	······································		17 50	71	
Amount E - PO / \							13,52	3/ -	
Amount F – Differ		T-18%					10,52	3/ -	
Quantity received			Yes 🗆 I	Excess re	ceived Short	received	□ Other (expla	ined helow)	
s difference betwe	en PO / Bill acce	ptable?			ined below)		(***)	———	
Excess / short mate	rial received		i	□ Approved - within acceptable limits □ No (explained below)					
Close PO / W?O	Yes No – wait for balance material No (explained below)								
Advance paid / PD	C given (deduct	when paying)	□ Yes – R		₩ No		vo (explained b	elow)	
Payment - due date				1 1	2110				
Remarks:			1, 1	5/11/2	21			-	
									
Approved	Purchase F								
		urchase AF	PKROVE Manager	u M		unts – ver of	Accountant	Accounts	
ign:	dhana		4 NOV 202	<u> </u>	- b			Manager	
Date Sa				1 1					
otes: 1. In case am	5111/21		ISH PAR! R.PROCUP	KH EMENT			-		

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/-

Invoice No.

Praful Sanitary

Dated

3-6-429/6, SRI SAI TOWER. PS/21-22/ 694 26-Oct-21 St.No.4 HIMAYAT NAGAR **Delivery Note HYDERABAD** GSTIN/UIN: 36ACWPG4864A1ZG State Name: Telangana, Code: 36 Invoice Reference No. & Date. Other References E-Mail: prafulsanitary@gmail.com Credit Buyer (Bill to) Buyer's Order No. Dated **Modi Consultancy Services** 81057 28-Sep-21 5-4-187/3 & 4, Ilnd Floor Dispatch Doc No. **Delivery Note Date** M.G.Road, Secunderabad. Invoice 26-Oct-21 State Name : Telangana, Code : 36 Dispatched through Destination Self Greens Tower, Begumpet SI Description of Goods HSN/SAC GST Quantity Rate per Disc. % Amount No. Rate 1 600x600mm Cl Frame & Cover 7325 18 % 25 % 4 No: 3,820.00 No: 11,460.00 **Output CGST** 1,031.40 **Output SGST** 1,031.40 ROUNDING OFF 0.20 Total 4 No: 13,523.00 Amount Chargeable (in words) E. & O.E Indian Rupees Thirteen Thousand Five Hundred Twenty Three Only HSN/SAC Central Tax State Tax Total Rate Amount Rate Amount Value Tax Amount 7325 1,031.40 1.031.40 9% 2.062.80 Total 11,460.00 1,031.40 1.031.40 2,062.80 Tax Amount (in words): Indian Rupees Two Thousand Sixty Two and Eighty paise Only 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. Authorised Signatory SUBJECT TO HYDERABAD JURISDICTION This is a Computer Generated Invoice



Purchase Order

Page(s) 1 Of 1

28-09-2021 12:23:47

81057		

27.09.21 3:07:17

From Company: Mody Consultancy Services

5-4-187/3&4, II Floor, M.G.Road, Secunderabad-500003.

GST No.:

Supplier Details					
Praful Sanitary	Doc No 81057 183202				
3-6-138/5, Himayat Nagar, Hyc	Doc Date 27-09-2021				
		Quote No	NIL		
GSTIN 36ACWPG864A1ZG	40077300	Quote Date 24-09-20		21	
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 7010 - Plumbing - CI - Manhole cover - 2 In x2 In - nos	4.00	3,820.00	25.00	18.00	13,522.80		
Rupees: Thirteen Thousand Five Hundred Twenty Two and Paise Eighty Only.							

Terms and Conditions :-

Specification /

All items shall be of "HEP" brand. 32kgs capacity.

Payment Terms

After Delivery & Production of bill

Tax

Inclusive of all taxes

Delivery Date

Next day.

Delivery Location

Greens Towers

Begumpet Main Road, Hyd. Opp. Hyderabad Public School.

Phone. 66335551

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 green towers UB & LB area purpose.

Completion Date

mont

Measurment

Nil Nil

Security Remarks

For Mody Consultancy Services

Authorised Signatory

Accepted the above Terms And Conditions For *Praful Sanitary*

ame:	Name :	Date : / /

Requisition Form

Comp	pany Name:	MCS			Date:			24-09-2021		
Site &	& Phase:	Greens tower	rs			· · · · · · · · · · · · · · · · · · ·				
Supplier					Req. No.			15:08		
Material required before date: Urg		Urgent	t ID No.			183202				
No	No Description			Size		Quantity Units				
1	Iron manhole cover			2'x2'		04	nos			
2			*******							
3										
4					-0	<u> </u>				
5			~· <u>·</u>	810	5 1					
6										
7										
8										
9										
10										
Rem	arks .: towards greens to	wers UB &LB	area purp	ose.				TOUED		
Prepared By Meenakshi. N			Approved by							
Sign.& Date 24-09-2021		-		Sign. & Date 9A 77 SEP 1911				1		
Note	: On receipt of material a	nt site write inv	ward numb	ber and date in	last 2 co	lunns!	P. M	ROVED SEP 2021 PRABHAKAR ANAGER PURCHA	<u> </u>	