PURCHASE DIVISION
Advice for approval for credit to supplier

M e

Date:	14-11-2021	Prepared by:	Ch. Pranavi
PO/WO no.	82185	PO / WO Date.	29-Oct-21
Supplier Name	Praful Sanitary.	PO/WO amount	13,054.22/-
Firm/Company	Silver Oak Villas LLP	Project	SOV-III
Sl. No.	Bill No.	Bill Date	Bill amount
1	705	29-Oct-2021	13,054/-
2			
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			13,054/-

Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN
1.			1363.	□ 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:	13,054.22/-
Amount E – PO / WO value:	13.05.22/-
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	18-11-21
Remarks:	– Final Bill –

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	Pranavi	[signature]					
Date	14-11-2021	15/11					

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)
Silver Oak Villas LLP
5-4-187/3&4, IInd Floor, M.G. Road
Secunderabad
GSTIN/UIN : 36ADBFS3288A2Z7
State Name : Telangana, Code : 36

Invoice No. **PS/21-22/ 705**	Dated **29-Oct-21**
Delivery Note **Invoice**	
Reference No. & Date.	Other References **Credit**
Buyer's Order No. **82185**	Dated **29-Oct-21**
Dispatch Doc No. **Invoice**	Delivery Note Date **29-Oct-21**
Dispatched through **Goods Vehicle**	Destination **Cherlapally**

Sl No	Description of Goods	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**20x20mm Cpvc MABT**	3917	18 %	**20 No:**	237.60	No:	47 %	**2,518.56**
2	**20x20mm Cpvc Brass Elbow**	3917	18 %	**20 No:**	113.40	No:	47 %	**1,202.04**
3	**15mm Brass Ball Valve**	8481	18 %	**20 No:**	404.00	No:	35 %	**5,252.00**
4	**20x15mm Cpvc MABT**	3917	18 %	**20 No:**	150.50	No:	47 %	**1,595.30**
5	**20mm Metal Clamp**	7318	18 %	**25 No:**	12.00	No:	47 %	**159.00**
6	**15x100mm G I Nipple**	7307	18 %	**20 No:**	24.00	No:	30 %	**336.00**
								11,062.90
	Output CGST							**995.66**
	Output SGST							**995.66**
	Less : ***ROUNDING OFF***							**(-)0.22**
	Total			**125 No:**				**₹ 13,054.00**

Amount Chargeable (in words)

E. & O.E

Indian Rupees Thirteen Thousand Fifty Four Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
3917	5,315.90	9%	478.43	9%	478.43	956.86
8481	5,252.00	9%	472.68	9%	472.68	945.36
7318	159.00	9%	14.31	9%	14.31	28.62
7307	336.00	9%	30.24	9%	30.24	60.48
Total	11,062.90		995.66		995.66	1,991.32

Tax Amount (in words) : **Indian Rupees One Thousand Nine Hundred Ninety One and Thirty Two paise Only**

PRAFUL SANITARY

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.

for Praful Sanitary

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

INWARD WITH TIME:
Inward No: 1363 Dt: 30/10/21
MRN No: 986516 Dt: 01/11/21
Received By: Sign:
SILVER OAK VILLAS PART-III

SUMMIT SALES LLP R.R. DIST.
IN WARD
No: 86430
Date: 8-11-21
Sign:

Purchase Order

 29-10-2021 10:15:57 AM

82185
25.10.21 1:32:48

From Company : **Silver Oak Villas LLP**
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003
G S T No. : 36ADBFS3288A2Z7

Supplier Details

Praful Sanitary
3-6-138/5, Himayat Nagar, Hyderabad.

GSTIN 36ACWPG864A1ZG 40077300
65526886. 9849624797

Doc No	82185	183711
Doc Date	28-10-2021	
Quote No	NIL	
Quote Date	28-10-2021	
SupplyType	Supply	

Kind Attn : Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

	Item Name	Qty	Rate	Dis%	GST	Amount
1	10253 - Plumbing - CPVC - CPVC Reducer MTA - 3/4 in X 1/2 in - Nos *3/4" x 3/4" MABT*	20.00	237.60	47.00	18.00	2,971.90
2	10251 - Plumbing - CPVC - CPVC Reducer Elbow - 3/4 in X 1/2 in - Nos *3/4" x 3/4" brass elbow*	20.00	113.40	47.00	18.00	1,418.41
3	10096 - Plumbing - CPVC - CPVC Ball Valve - 1/2 In - nos	20.00	404.00	35.00	18.00	6,197.36
4	10253 - Plumbing - CPVC - CPVC Reducer MTA - 3/4 in X 1/2 in - Nos *3/4" x 1/2" MABT*	20.00	150.50	47.00	18.00	1,882.45
5	10101 - Plumbing - CPVC - CPVC Clamp - 3/4 In - nos	25.00	12.00	47.00	18.00	187.62
6	7069 - Plumbing - GI - Nipple - other - nos *1/2" x 4"*	20.00	24.00	30.00	18.00	396.48
				Total Order Value . . .		**13,054.22**

Rupees : Thirteen Thousand Fifty Four and Paise Twenty Two Only.

Terms and Conditions :-

Specification /	All items shall be of Sudhkhar brand
Payment Terms	After Delivery & Production of bill
Tax	Inclusive of all taxes
Delivery Date	Next Day.
Delivery Location	Silver Oak Villas Part III Sy .No.11,12,14,15,16,17,18 , 294 Phone. 0
Penality For Delay	Nil
Transportation	Included in the above price.
Warranty	Nil
Advance Paid	Nil
Other Terms	We reserve the right to reject items not conforming to quality and specifications. Above order for Curing points purpose
Completion Date	Nil
Measurment	Nil
Security	Nil
Remarks	

For *Silver Oak Villas LLP*

Authorised Signatory

Name : ____________

Accepted the above Terms And Conditions

For *Praful Sanitary*

Name : ____________

Date : __/__/____

Requisition Form

Company Name:	Silver Oak Villas LLP -III	Date:	28-10-2021
Site & Phase :	Silver Oak Villas-III	Time:	10.00
Supplier		Req. No.	183711
Material required before date:	Urgent	ID No.	70705

No	Description	Size	Quantity	Units	Inward No	Date
1	Brass MTA	3/4" x3/4"	20	Nos		
2	Brass elbow	3/4" x3/4"	20	Nos		
3	Brass ball valve	1/2"	20	Nos		
4	Brass MTA	3/4"x1/2"	20	Nos		
5	Screws	35x80mm	02	Box		
6	Fishers 82185	6mm	02	Box		
7	CPVC clamp	3/4"	25	Nos		
8	Plain elbow	3/4"	50	Nos		
9						
10						

Remarks: -For curing points purpose

Prepared By	Ch. Pranavi		
Sign.& Date	28-10-2021	Approved by Sign. & Date	

APPROVED
28 OCT 2021
P. PRABHAKAR
Sr. MANAGER PURCHASE

APPROVED
27 OCT 2021
P. PRABHAKAR
Sr. MANAGER PURCHASE

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

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

No	Description	Size	Quantity	Units	Inward No	Date

Remarks:

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

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