PURCHASE DIVISION
Advice for approval for credit to supplier

				8				A	
Date:		10	7/12	21	Prepa	ared by:		both	ikas.
PO/WO no		8	3278	1	PO/	WO Date.		4/12	121
Supplier N	ame	bel	0	mskry	/ PO/V	VO amount		19.2	52 700 .
Firm/Comp	oany		FIVRE	0	Proje	ct		drupi	us.
Sl. No.		Bill No.		-	Bill I	Date		Bill amount	
1.			823		-	1/12/2	1	19.85	2-10
2.						( )			
3.									
Amount A	– Bills tot	al(Excludi	ng Transport	& Hamali Ch	narges):	*		19,252	-60 ,
Sl. No.	DC No		D	C. Date		MRN N	No.	DC matches MRN	
1.				1	***************************************	100	1688	☑ Yes □ No	
2.								☑ Yes □ No	
3.								☑ Yes □ No	
4.								☑ Yes □ No	
Amount B	-Other Cr	edits : Han	nali charges						>
Amount C	-Other De	bits:							
Amount D	(D=A+B-	C) – Amou	ant to be cred	lited to the sur	plier:	<del></del>		19,352	-00
Amount E	- PO / WO	) value:						19.352	
Amount F -	- Differen	ce (A – E):	:						_
Quantity re	ceived as	per PO/W	0		TYes o	Excess recei	ved   Short re	ceived  Other (exp	lained below)
Is differenc	e between	PO / Bill	acceptable?		□ Yes □ l	No (explaine	ed below)		
Excess / sho	ort materia	l received			□ Approv	ed - within	acceptable lim	its   No (explained	below)
Close PO /	W?O				o Yes o l	No – wait for	r balance mate	rial   No (explaine	d below)
Advance pa	id / PDC	given (ded	uct when pay	ring)	□ Yes - F	Rs. /201	No		
Payment - c	due date				22	/12-		***************************************	
Remarks:					20	112			
-				***************************************					
Approved by		chase ficer	Purchase Manager	Procurer Manag		M D	Accounts -		Accounts
Sign:	-	7	^				bitt		Manager
			PAL						
Date			29/2:	2					

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. 5,000/-, Purchase Manager and Procurement Manager to approve all bills from 5,000/- 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/-

Authorised Signatory

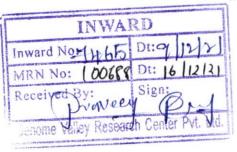
## **GST INVOICE**

_					T				-		
Pr	raful Sanitary					ce No.			Dat		
	6-429/6,SRI SAI TOWER, No.4 HIMAYAT NAGAR					21-22/ ery Not			9-D	ec-21	
	YDERABAD				100		te		1		
G	STIN/UIN: 36ACWPG4864A1ZG				Invo	rence N	1 & OV	Date	Oth	er Refe	rences
	ate Name: Telangana, Code:36 -Mail:prafulsanitary@gmail.com					. 500 1			1 2 200	dit	
	uyer (Bill to)				Buye	r's Ord	er No.		Dat		
G	V Research Center Pvt Ltd				8327	78			4-D	ec-21	
	4-187/3&4, lind Floor				Disp	atch Do	oc No.		Del	ivery No	te Date
	oham Mansion, M G Road				Invo					ec-21	
	ecunderabad STIN/UIN : 36AAHCG4562D1ZP					atched	throug	<b>j</b> h		stination	
1	tate Name : Telangana, Code : 36				Self				The	urkapa	lly
SI		121	HSN/S	SAC	GST	Quan	tity	Rate	per	Disc. %	Amount
No.	Goods and Services		-		Rate				-	-	
1	40mm Hdpe Pipe 6 Kg		3917		18 %	250 N	Itrs	82.00	Mtrs	20 %	16,400.00
											4 4-0 00
		Output CGST									1,476.00
		Output SGST					-				1,476.00
											_
			40.0								
			-								
i			-	-							
$\vdash$		Total	_	-		250 N	Atrs		+	-	₹ 19,352.00
An	nount Chargeable (in words)								1		E. & O.E
	dian Rupees Nineteen Thousand Three	Hundred Fifty Ty	wo On	lv							
5	HSN/SAC			Taxa	ble	Cen	tral Ta	x	Sta	ate Tax	Total
Ĺ.,				Val	ue	Rate	Amo	unt R	ate	Amou	nt Tax Amount
	917			16,40	00.00	9% 9%	1,47	6.00	9% 9%	1,476	2,952.00
99						14%			14%		
-		-	Γotal	16,40	00.00		1,47	6.00		1,476	.00 2,952.00
	ex Amount (in words): Indian Rupees Two Tho	ousand Nine Hun	idred I	Fifty	Two	Only				* PRAA HIM	SAN, PROPERTY AND
C	ompany's PAN : ACWPG4864A									100	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.

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice





## **Purchase Order**

Page(s) 1 Of 1

04-12-2021 11:41:43 AM

83278

02.12.21 2:43:08

From Company: G V Reserch Centers Pvt Ltd

5-4-187/3&4, II nd Floor, Soham Mansion, MG Road, Secunderabad

G S T No.: 36AAHCG4562D1ZP

Praful Sanitary 3-6-138/5, Himayat Nagar, Hyderabad.			164227	
			12-2021	
40077300	<b>Quote Date</b>	01-12-2021		
349624797	SupplyType	Supply		
		Quote No 40077300 Quote Date	Doc Date 04-12-202 Quote No NIL 40077300 Quote Date 01-12-202	

Kind Attn: Mr. Ashish Gupta

Purchase Order for the Supply of following Items.

Item Name	Qty	Rate	Dis%	GST	Amount
1 7099 - Plumbing - HDPE - Pipe - 6Kgs pressure - 1 1/2 In - mtrs 40mm	250.00	82.00	20.00	18.00	19,352.00
		Total Or	der Value	e	19,352.00

## Terms and Conditions :-

Specification /

As per details given in the quotation.

**Payment Terms** 

After Delivery & Production of bill

Tax

GST included in above price.

**Delivery Date** 

Next Day.

**Delivery Location** 

Innopolis

Sy no-542, Genome Valley, Thurkapally, Hyderabad, Telangana

Phone. Mr. Sanjay - 9502288244

Penality For Delay Nil

Transportation

Transport cost shall be borne by us.

Warranty

Nil

Advance Paid

Nil

Other Terms

We reserve the right items not confirming to qlty & specs. Breakage in your account. Above order for ETP To sump

room purpose

**Completion Date** 

Nil Nil

Measurment Security

Nil

Remarks

Original invoice + Copy of proof of delivery is required to process invoice for payment. DO NOT send original invoice to site. Original invoice must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email.

For GV Reserch Centers Pvt Ltd

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary** 

Name :

Name : \_\_\_\_\_

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

Requisition Form

1507

Company Name: GV Research Site & Phase: Innopolis Supplier		GV Research	GV Research Centers Pvt Ltd.				01.12.2021		
		Innopolis	Innopolis		· · · · · · · · · · · · · · · · · · ·		17:00		
			Req. No.			164227 .			
Material required before date:				ID No.			71714		
No Description		Description	Si	ze	Quantity	Units	Inward No	Date	
1.	HDPE Pipe (6 kg/cm2) for ET		P 401	nm	250	m			
2.									
3.									
4.		ລ							
5.		2010							
6.		832							
7.									
8.									
9.									
10.									
Remark	ks:Towards ET	P to Sump room							
Prepared By Abdul Rahm		Abdul Rahma	an	Approve	d by		Mr.Ramesh reddy	7	
Sign. &	Date	01.12.2021		Sign. &	Date		01.12.2021		

Note:

APPROVED BY

0 1 DEC 2021

COHAM MODI

MANAGING DIRECTOR