PURCHASE DIVISION

Advice for approval for credit to supplier

					••					
Date:			13	اها ه)	Prepare	d by:		110	
PO/WO n	٥٠.			87	359	PO/W	O Date		()	2/21
Supplier N		P.	ojul	Sam	Jany	PO/WO	amou	ni	86,	559/-
Firm/Com	pany		0.	55	LL	Project		100	Shi	up 1
SL No.		Bill No.				Bill Dat	e		Bill amount	the state of the s
1		,		813	5		8/1	2/21	1 45	454
2				811	2			—	45	4746
3	,									
4										
Amount A	- Bills	otal(Exclud	ing Transp	ort & Ha	mali Charg	;es):			8	7,660/2
SL No.	DC .N	0		DC. Da	te		MIRI	No.	DC matches h	IRN
1.									DYes D No)
2.									DYes D No	
3.								15	DYes D No	1
a was a substitution of the American Substitution	CORRESPONDED CO.	Credits : Tra	nsportatio	n charges	1800	1=12	X 18	1.	L	1,2486
Amount C	-Other 1	Debits:								,
Amount D	(D=A+I	I-C) - Amo	ant to be c	redited to	the suppli	er:			90	908f-
Amount E	-PO/W	O value:							8	6,659/2
Amount F	- Differe	ace (A - E)	: GST-189				- Charles			4,249
Quantity re	ceived a	s per PO /W	O	4	o Yes o	Excess re	ceived	n Short received	D Other (expis	ined below)
ls differenc	e betwee	n PO/Bill	acceptable	?	n Yes n	No (expla	ined be	elow)		
Excess / sh	ort mater	ial received			n Approv	red - with	in acc	eptable limits 🗆 l	No (explained b	elow)
Close PO/	WYO	Charles a Company of the Company of			Diani	No – wait	for ba	ance material D	No (expisined t	eiow)
Advance pa	id / PDC	given (ded	uct when	paying)	□ Yes -1	Rs, /-	D No	N	The state of the s	
Payment -	due date			19	-	1	8/1:	2/21		
Remarks:							٦.			
					V.					Printed Angle Printed Street S
Approve		urchase Officer	Purcha Manag	er	Manager		D	Accounts - receiver of bill	Accountant	Accounts Manager
Sign:		1)	1	6 DEC 2	1			and the same of th	
Date			V	MANAG	ER PROC	THEMEN.	r			

Notes: 1. In case amount 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/-

Dated

Invoice No.

12.	aful Sanitary				ce No.		Date		
	-429/6,SRI SAI TOWER,				1-22/ 81	5	8-D	ec-21	
	Ño.4 HIMAYAT NAGAR YDERABAD				ery Note				
	STIN/UIN: 36ACWPG4864A1ZG			Invo		9 Data	Oth	er Refer	0000
St	ate Name : Telangana, Code : 36			Refe	rence No.	& Date.	Toronto I		5555
	Mail: prafulsanitary@gmail.com	<u> </u>		Divis	de Order	Na	961 Dat	1824443	33
	yer (Bill to)				r's Order	NO.	1		
	ummit Sales LLP			8335		No.		ec-21 ivery Not	to Data
	4-187/3&4, IInd Floor, M.G Road			(1100gatoras • 600g	atch Doc I	NO.	100000000000000000000000000000000000000		le Date
	ecunderabad STIN/UIN : 36ACQFS2044C1Z7			Invo	atched thr	ough		ec-21	
	ate Name : Telangana, Code : 36				ds Vehic				
				Goo	as venic	ie	CIII	erlapall	у
SI	Description of	HSN/S	AC	GST	Quantity	Rate	per	Disc. %	Amount
No.	Goods and Services			Rate					
1	500 Ltrs Water Tank D/L	3925		18 %	18 No	: 2,400.00	No:	15 %	36,720.00
'	500 Lus Water Talik D/L	0020		.0 /0	10 110				00,120.00
			1						
	Output CGST								3,466.80
	Output SGST								3,466.80
	Transport Charges @ 18%			18 %			1. 3.	1 1	1,800.00
	ROUNDING OFF								0.40
		100							
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		15							
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	(A-23)		1						
	A second		1						
-	Total	+			18 No		+	+	T 45 454 00
-		1			18 NC):			₹ 45,454.00
	nount Chargeable (in words)								E. & O.E
In	idian Rupees Forty Five Thousand Four Hundred Fifty Fo	our On	ly						
	HSN/SAC		Taxa		Centra			ate Tax	Total
-	205		Val				ate	Amour	NAME AND ADDRESS OF THE OWNER, WHEN PERSON ADDRESS OF THE OWNER, WHEN PERSON AND ADDRESS OF THE OWNER, WHEN
99	925			20.00	9%	3,304.80 162.00	9% 9%	3,304 162	
9:		Total		20.00		3,466.80	970	3,466	AND DESCRIPTION OF THE PERSON NAMED IN
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Ta	ax Amount (in words): Indian Rupees Six Thousand Nine Hund	dred TI	hirty	Thre	e and Si	xty paise	Only		
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								12	1 121
								1 0 HI	MAYATNAGAR
								1/*/	15.11
_								1/2	200
	ompany's PAN : ACWPG4864A								or Praful Sanitary
-	eclaration								
	/e declare that this invoice shows the actual price of the goods escribed and that all particulars are true and correct.							Α.	uthorized Cianatas
u		ADAD III	DICC	ICTION				A	uthorised Signatory
	SUBJECT TO HYDER	WRAD JO	KISD	ICTION					
	This is a Computer	Generate	d Invo	pice					
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	INWARD	10	-		lo				
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RN No: eceived By: Sign: SUMMIT SALES LLP

GST INVOICE

Praful Sanitary 3-6-429/6, SRI SAI TOWER, St.No.4 HIMAYAT NAGAR

St.No.4 HIMMATAT NAGAR
HYDERABAD
GSTIN/UIN: 36ACWPG4864A1ZG
State Name: Telangana, Code: 36
E-Mail: prafulsanitary@gmail.com

Buyer (Bill to)

Summit Sales LLP

5-4-187/3&4, IInd Floor, M.G Road

Secunderabad GSTIN/UIN State Name

36ACQFS2044C1Z7 : Telangana, Code : 36

Invoice No.	Dated
PS/21-22/ 815	8-Dec-21
Delivery Note	
Invoice	
Reference No. & Date.	Other References
	9618244433
Buyer's Order No.	Dated
83359	7-Dec-21
Dispatch Doc No.	Delivery Note Date
Invoice	8-Dec-21
Dispatched through	Destination
Goods Vehicle	Cherlapally

0.		HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
	500 Ltrs Water Tank D/L	3925	18 %	18 No:	2,400.00	No:	15 %	36,720.00
	Output CGST Output SGST Transport Charges @ 18% ROUNDING OFF	99	18 %					3,466.80 3,466.80 1,800.00 0.40
	a a							
		Status						
	। । ।							
-	Tota	ı		18 No:				₹ 45,454.0

Amount Chargeable (in words)

E. & O.E

Indian Rupees Forty Five Thousand Four Hundred Fifty Four Only

HSN/SAC	Taxable	Cen	tral Tax	Sta	ate Tax	Total
	Value	Rate	Amount	Rate	Amount	Tax Amount
3925	36,720.00	9%	3,304.80	9%	3,304.80	6,609.60
99	1,800.00	9%	162.00	9%	162.00	324.00
99		14%		14%		
Total	38,520.00		3,466.80		3,466.80	6,933.60

Tax Amount (in words): Indian Rupees Six Thousand Nine Hundred Thirty Three and Sixty 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.

for Pratul Sanitary

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION This is a Computer Generated Invoice

TS126A8815 **GST INVOICE** (EXTRA COPY) Invoice No. Dated **Praful Sanitary** 3-6-429/6, SRI SAI TOWER, PS/21-22/ 816 8-Dec-21 St.No.4 HIMAYAT NAGAR **Delivery Note HYDERABAD** Invoice GSTIN/UIN: 36ACWPG4864A1ZG State Name : Telangana, Code : 36 E-Mail : prafulsanitary@gmail.com Reference No. & Date. Other References 9618244433 Buyer (Bill to) Buyer's Order No. Dated **Summit Sales LLP** 83359 8-Dec-21 5-4-187/3&4, IInd Floor, M.G Road Dispatch Doc No. Delivery Note Date Secunderabad Invoice 8-Dec-21 GSTIN/UIN 36ACQFS2044C1Z7 Dispatched through Destination State Name Telangana, Code: 36 **Goods Vehicle** Cherlapally SI Description of HSN/SAC GST Rate Quantity per Disc. % Amount No Goods and Services Rate 500 Ltrs Water Tank D/L 3925 18 % 2,400.00 No: 15 % 18 No: 36,720.00 **Output CGST** 3,466.80 **Output SGST** 3,466.80 Transport Charges @ 18% 18 % 1,800.00 **ROUNDING OFF** 0.40

Amount Chargeable (in words)

Indian Rupees Forty Five Thousand Four Hundred Fifty Four Only

HSN/SAC Central Tax Taxable State Tax Total Value Rate Amount Rate Amount Tax Amount 3925 36,720.00 9% 3,304.80 9% 3,304.80 6,609.60 99 1.800.00 9% 162.00 9% 162.00 324.00 Total 38,520.00 3,466.80 3,466.80 6,933.60

SUBJECT TO HYDERABAD JURISDICTION

18 No:

Total

Tax Amount (in words): Indian Rupees Six Thousand Nine Hundred Thirty Three and Sixty 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.

for Praftil Sanitary

SAN

Authorised Signatory

ter Generated Invoi INWARD 21 inward No: 17254 Dt: 9 MRN No: 1004G Dt: Sign: Peceived By: SUMMIT SALES L

₹ 45,454.00

E. & O.E

Praful Sanitary
3-6-429/6, SRI SAI TOWER,
St.Nb.4 HIMAYAT NAGAR
HYDERABAD
GSTIN/UIN: 36ACWPG4864A1ZG
State Name: Telangana, Code: 36
E-Mail: prafulsanitary@gmail.com
Buyer (Bill to)

Summit Sales LLP

5-4-187/3&4, IInd Floor, M.G Road

Secunderabad GSTIN/UIN State Name

: 36ACQFS2044C1Z7 : Telangana, Code : 36

Invoice No.	Dated
PS/21-22/ 816	8-Dec-21
Delivery Note	
nvoice	
Reference No. & Date.	Other References
1.4	9618244433
Buyer's Order No.	Dated
3359	8-Dec-21
Dispatch Doc No.	Delivery Note Date
nvoice	8-Dec-21
Dispatched through	Destination
Goods Vehicle	Cherlapally

SI 10.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
	500 Ltrs Water Tank D/L	3925	18 %	18 No:	2,400.00	No:	15 %	36,720.00
	Output CGST	whole						3,466.80
	Output SGST Transport Charges @ 18% ROUNDING OFF	99	18 %					3,466.80 1,800.00 0.40
					vate			
				8				
	V I g *s	adija Ro						
_	Total			18 No:				₹ 45,454.00

Amount Chargeable (in words)

E. & O.E

Indian Rupees Forty Five Thousand Four Hundred Fifty Four Only

HSN/SAC	Taxable	Central Tax		State Tax		Total
	Value	Rate	Amount	Rate	Amount	Tax Amount
3925	36,720.00	9%	3,304.80	9%	3,304.80	6,609.60
99	1,800.00	9%	162.00	9%	162.00	324.00
99		14%		14%		
Total	38,520.00		3,466.80		3,466.80	6,933.60

Tax Amount (in words): Indian Rupees Six Thousand Nine Hundred Thirty Three and Sixty 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.

Authorised Signatory

for Pratul Sanitary

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

Purchase Order

Page(s) 1 Of 1

09-12-2021 3:20:13 PM

83359

02.12.21 2:45:21

From Company: Summit Sales LLP

5-4-187/3&4,II nd floor,MG Road, Secunderabad-500003.

G S T No.: 36ACQFS2044C1Z7

Supplier Details				
Praful Sanitary		Doc No	83359	169224
3-6-138/5, Himayat Nagar, Hyder	abad.	Doc Date	06-12-202	21
		Quote No	NIL	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	01-12-202	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 7326 - Plumbing - PVC - Water tank - 500lts - nos	36.00	2,400.00	15.00	18.00	86,659.20
		Total Or	der Value	e	86,659.20

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

Summit Housing LLP

Cherlapally, Behind Kingston PG college, Hyderabad

Phone. 9618244433, Hamendra

Penality For Delay Nil

Transportation

Extra.

Warranty

Nil

Advance Paid

Nil

Other Terms

We reserve the right to reject items not conforming to quality and specifications. Above order for stock replinishing

purpose

Completion Date

Nil

Measurment

Nil Nil

Security

Remarks

For Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary**

Name : _____

Date : __/__/___

- Page(s) 1 Of 1

06-12-2021 4:56:14 PM

Original / Office Copy / Purchase Div.Copy

From Company: Summit Sales LLP

5-4-187/3&4,II nd floor,MG Road, Secunderabad-500003.

G S T No.: 36ACQFS2044C1Z7

Supplier Details				
Praful Sanitary		Doc No	83359	169224
3-6-138/5, Himayat Nagar, Hyd	erabad.	Doc Date	06-12-202	21
		Quote No	NIL	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	01-12-202	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 7326 - Plumbing - PVC - Water tank - 500lts - nos	36.00	2,400.00	15.00	18.00	86,659.20
8		Total O	der Value	e	86,659.20

Terms and Condit	ions :-	
Specification /	All items shall be of Sudhkhar brand	
Payment Terms	After Delivery & Production of bill	KBBBOVAL
Tax	Inclusive of all taxes	For MDs APPROVAL High Value/quantity beyond limits. processed-post approval.
Delivery Date	Next Day.	Po/Req. processed-post approval. Po/Req. processed-post approval.
Delivery Location	Summit Housing LLP Cherlapally, Behind Kingston PG college, Hyderabad Phone. 9618244433, Hamendra	Po/Req. processed-post approval. Po/Req. processed-post approval. Approval for technical details/clarification. Replenishing SSLLP stock Other
Penality For Delay	Nil	6.49
Transportation	Extra.	
Warranty	Nil	
Advance Paid	Nil	
Other Terms	We reserve the right to reject items not conforming to purpose	quality and specifications. Above order for stock replinishing
Completion Date	Nil	
Measurment	Nil	\sim
Security	Nil	

Name : _

APPROVED BY 0 8 DEC 2021 SOHAM MODI MANAGING DIRECTOR

For Su	mmit Sales LLP	
Authoris	sed Signatory	
	207/12/	2021
Name		

Remarks

Accepted the above Terms And Conditions For Praful Sanitary

Date : __/__/___

1511

Requisition Form

Compa	any Name:	SUMMIT	SALES	LLP	Date:		01-12-2021	
Site &	ite & Phase : SUMMIT HOUSING LLP		NG LLP	Time:		15:00PM		
Supplier			Req. No.		169224			
Material required before date:				ID No.		71777		
S.No	Descripti	Description		Size	Quantity	Units	Inward No	Date
1	PVC Single Socket Pipe			4"	60	Length		
2	Plain Bend			4"	60	Nos		
3	45 Degree Bend			4"	36	Nos		
4	Reducer Tee			4x3	44	Nos		
5	Tee with Door			4"	48	Nos		
6	Plain Tee			4"	36	Nos		
7	Floor Trap			4"	32	Nos		
8	PVC Single Socket Pipe			3"	60	Length		
9	Plain Bend	\		3"	45	Nos		
10	Plain Tee	a by X		3"	48	Nos		
11	Reducer Brush	9		3"x1 1/2"	50	Nos		
12	End Cap	U		3"	20	Nos		
13	Rigid Elbow			1 1/2"	250	Nos		
14	Rigid Pipe			1 1/2"	30	Nos		
15	PVC Solvent			250ml	36	Nos		
16	PVC Water Tank			500ltrs	36	Nos	W 833	59
Remar	ks:For Replenishing Stock	Purpose		8				,
Prepar		Bhavani					APPROVED	BY
Sign.& Date 01-12-2021		1		Sign. & Da	ate	0 4 DEC 2021		

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

SOHAM MODI MANAGING DIRECTOR