PURCHASE DIVISION
Advice for approval for credit to supplier

Date:	10/01/22	Prepared by:	N. Vanajakshi
PO/WO no.	83853	PO / WO Date.	23/12/21
Supplier Name	Praful Sanitary	PO/WO amount	12,092.64
Firm/Company	Nilgiris Estates	Project	NE
Sl. No.	Bill No.	Bill Date	Bill amount
1	PS/21-22/876	28/12/21	12,092.64
2			/
3			
4			
Amount A – Bills total(Excluding Transport & Hamali Charges):			12,092.64

Sl. No.	DC .No	DC. Date	MRN No.	DC matches MRN
1.	—	—	101387.	□ Yes □ No
2.				□ Yes □ No
3.				□ Yes □ No

Amount B –Other Credits : Transportation charges	1416/-
Amount C –Other Debits :	—
Amount D (D=A+B-C) – Amount to be credited to the supplier:	13,509/-
Amount E – PO / WO value:	12,092.64
Amount F – Difference (A – E): GST-18%	1416/-

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	17/01/22
Remarks:	

Approved by	Purchase Officer	Purchase Manager	Procurement Manager	M D	Accounts – receiver of bill	Accountant	Accounts Manager
Sign:	Vanaja	[signature]					
Date	10/1/22						

APPROVED
10 JAN 2022
PRABHAKAR
SR. MANAGER PURCHASE

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

(TRIPLICATE FOR SUPPLIER)

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	Invoice No. **PS/21-22/ 876**	Dated **28-Dec-21**
	Delivery Note **Invoice**	
	Reference No. & Date.	Other References **Credit**
Buyer (Bill to) **Nilgiri Estates** 5-4-187/3&4, IInd Floor, M.G. Road Secunderabad GSTIN/UIN : 36AAHFN0766F1ZA State Name : Telangana, Code : 36	Buyer's Order No. **83853**	Dated **23-Dec-21**
	Dispatch Doc No. **Invoice**	Delivery Note Date **28-Dec-21**
	Dispatched through **Self**	Destination **Rampally**

Sl No.	Description of Goods and Services	HSN/SAC	GST Rate	Quantity	Rate	per	Disc. %	Amount
1	**580mm Orissa Pan (White)**	6910	18 %	**4 No:**	1,950.00	No:	30 %	**5,460.00**
2	**Pvc Flush Tank (White)**	3922	18 %	**4 No:**	1,565.00	No:	30 %	**4,382.00**
3	**Pvc Long Bend**	3917	18 %	**4 No:**	145.00	No:	30 %	**406.00**
								10,248.00
	Output CGST							**1,030.32**
	Output SGST							**1,030.32**
	Transport Charges @ 18%	99	18 %					**1,200.00**
	ROUNDING OFF							**0.36**
	Total			**12 No:**				**₹ 13,509.00**

Amount Chargeable (in words) *E. & O.E*

Indian Rupees Thirteen Thousand Five Hundred Nine Only

HSN/SAC	Taxable Value	Central Tax Rate	Central Tax Amount	State Tax Rate	State Tax Amount	Total Tax Amount
6910	5,460.00	9%	491.40	9%	491.40	982.80
3922	4,382.00	9%	394.38	9%	394.38	788.76
3917	406.00	9%	36.54	9%	36.54	73.08
99	1,200.00	9%	108.00	9%	108.00	216.00
Total	**11,448.00**		**1,030.32**		**1,030.32**	**2,060.64**

Tax Amount (in words) : **Indian Rupees Two Thousand Sixty and Sixty Four paise Only**

PRAFUL SANITARY HIMAYATNAGAR HYDERABAD-29.

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

SUMMIT SALES LLP R.R. DIST.
IN WARD
No: 89076
Date: 30/12
Sign:

INWARD
In ward No: 22829 Dt: 28/12/21
MRN No: 101387 Dt: 29/12/21
Received By: Ashish
Sign:
Nilgiri Estates

Purchase Order

 23-12-2021 12:57:50 83853 opy

5:35:00

From Company : **Nilgiri Estates**
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003.
G S T No. : 36AAHFN0766F1ZA

Supplier Details			
Praful Sanitary	**Doc No**	83853	175461
3-6-138/5, Himayat Nagar, Hyderabad.	**Doc Date**	23-12-2021	
	Quote No	Nil	
GSTIN 36ACWPG864A1ZG 40077300	**Quote Date**	16-12-2021	
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	7304 - Plumbing - sanitary - Orissa pan - 20 In - nos *full set*	4.00	3,660.00	30.00	18.00	12,092.64
			Total Order Value . . .			**12,092.64**

Rupees : Twelve Thousand Ninty Two and Paise Sixty Four Only.

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	Nilgiri Estate Sy.No.143/133/134/135/136, Rampally Village. Phone. 9030931172
Penality For Delay	Nil
Transportation	Extra.
Warranty	Nil
Advance Paid	Nil
Other Terms	We reserve the right items not confirming to qlty & specs. Breakage in your account. Above order for V.No 157, 160, 135, 136 purpose.
Completion Date	Nil
Measurment	Nil
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 invoices must be sent to HO office or purchase site office. Proof of delivery /DC can be sent by email.

For ***Nilgiri Estates***

Authorised Signatory

30/12/2021

Name : ______

Name : ______

Accepted the above Terms And Conditions

For ***Praful Sanitary***

Date : __/__/____

Requisition Form

Company Name:	NILGIRI ESTATES	Date:	22-12-21
Site & Phase :	NILGIRI ESTATE	Time:	15:40
Supplier		Req. No.	175461
Material required before date:		ID No.	72293

No	Description	Size	Quantity	Units	Inward No	Date
1	Indian Toilet Flush Tank (PVC Long bend)	Std	04	Nos		
2						
3						
4	83853					
5						
6						
7						
8	3660/- 30/. +18%.					
9	1950/- -30/. 18%.					
10						

Remarks:- For villa no : 157, 160, 135, 136 purpose in the site

Prepared By	Sadhana		
Sign.& Date	22-12-21	Approved by	Akheel
		Sign. & Date	22-12-21

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

APPROVED
23 DEC 2021
P. PRABHAKAR
Sr. MANAGER PURCHASE

Certified by:

Project Manager
Nilgiri Estates

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

No	Description	Size	Quantity	Units	Inward No	Date
1						
2						
3						
4						

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.