PURCHASE DIVISION
Advice for approval for credit to supplier

| | | | | | |
|---|---|---|---|---|---|
| Date: | 18/1/22 | Prepared by | T.D. Mhetre | Serial no. | 1413 |
| Supplier name | Praful Sanitary | | | HO inward no. | |
| Firm/Company | MRPLLP | Project | NGH | HO received date | |
| PO/WO date | 30/12/21 | PO/WO No. | 84061 | Scan ID. | |

| Sl no. | Bill no. | Bill date | Bill amount | Original attached |
|---|---|---|---|---|
| 1. | 902 | 4/1/22 | 7,741-00 | ☑ Yes ☐ No |
| 2. | | | | ☐ Yes ☐ No |
| 3. | | | | ☐ Yes ☐ No |
| 4. | | | | ☐ Yes ☐ No |

| | |
|---|---|
| Amount A – Bills total (Excluding Transport & Hamali Charges): | 7,741-00 |
| Proof of delivery by way of: ☑ DCs/bill ☐ Steel report ☐ RMC pour report ☐ Solid block report ☐ Installation report | |

| | | | |
|---|---|---|---|
| MRN nos.: | 101925 | Proof of delivery matches MRN | ☑ 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: | 7,741-00 |
| Amount E – PO / WO value: | 7,741-00 |
| Amount F – Difference (A – E): | – |
| Quantity received as per PO /WO | ☑ Yes ☐ Excess received ☐ Short received ☐ Part received |
| Close PO / WO | ☑ Yes ☐ No – wait for balance material ☐ Other |
| Payment – due date | 24/1/22 |
| Remarks: | |

| Approved by | Purchase Officer | Purchase Manager | M D | Accountant | Accounts Manager |
|---|---|---|---|---|---|
| Name: | T.D. Mhetre | | | | |
| Sign: | [signature] | [signature] | | | |
| Date | 18/1/22 | | | | |
| Approval limit | Upto 20k | Above 20k | Above 100k | Upto 20k | Above 20k |

APPROVED
18 JAN 2022
MINISH PARIKH
MANAGER PROCUREMENT

Notes: 1. In case amount to be credited to supplier and the bills total does not match, accountants to prepare JV for debit or credit. 2. This set should only have 5 documents i.e., advice to credit to supplier, original bill, proof of delivery, original purchase order with barcode, original requisition. 3. Do not attach additional documents like weighment slips, RMC batch reports, duplicate documents, Eway bills, test reports, etc. 4. In Amount A, exclude transport, Hamali charges, etc., and instead include in Amount B. 5. This report must reach HO within one working day of approval by purchase officer/purchase manager.

# 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)
**Modi Reality Pocharam LLP**
5-4-183/3&4, IInd Floor
Soham Mansion, M G Road
Secinderabad.
GSTIN/UIN : 36ABIFM1836H1Z7
State Name : Telangana, Code : 36

| | |
|---|---|
| Invoice No.<br>**PS/21-22/ 902** | Dated<br>**4-Jan-22** |
| Delivery Note<br>**Invoice** | |
| Reference No. & Date. | Other References<br>**Credit** |
| Buyer's Order No.<br>**84061** | Dated<br>**3-Jan-22** |
| Dispatch Doc No.<br>**Invoice** | Delivery Note Date<br>**4-Jan-22** |
| Dispatched through<br>**Self** | Destination<br>**Nilgiri Heights, Pocharam** |

| Sl No. | Description of Goods and Services | HSN/SAC | GST Rate | Quantity | Rate | per | Disc. % | Amount |
|---|---|---|---|---|---|---|---|---|
| 1 | **40mm Hdpe Pipe 6 Kg** | 3917 | 18 % | **100 Mtrs** | 82.00 | Mtrs | 20 % | **6,560.00** |
| | ***Output CGST*** | | | | | | | **590.40** |
| | ***Output SGST*** | | | | | | | **590.40** |
| | ***ROUNDING OFF*** | | | | | | | **0.20** |
| | Total | | | **100 Mtrs** | | | | **₹ 7,741.00** |

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

**Indian Rupees Seven Thousand Seven Hundred Forty One Only**

| HSN/SAC | Taxable Value | Central Tax Rate | Central Tax Amount | State Tax Rate | State Tax Amount | Total Tax Amount |
|---|---|---|---|---|---|---|
| 3917 | 6,560.00 | 9% | 590.40 | 9% | 590.40 | 1,180.80 |
| 99 | | 9% | | 9% | | |
| 99 | | 14% | | 14% | | |
| **Total** | **6,560.00** | | **590.40** | | **590.40** | **1,180.80** |

Tax Amount (in words) : **Indian Rupees One Thousand One Hundred Eighty and Eighty 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.

PRAFUL SANITARY HIMAYATNAGAR HYDERABAD-29.

**for Praful Sanitary**

Authorised Signatory

SUBJECT TO HYDERABAD JURISDICTION

This is a Computer Generated Invoice

SUMMIT SALES LLP R.R. DIST.
IN WARD
No: 89374
Date: 6/01
Sign:

# Purchase Order

 03-01-2022 4:02:52 PM Origir 84061

5:44:06

From Company : **Modi Realty Pocharam LLP**
5-4-183/3&4, II nd Floor, Soham Mansion, MG Road, Secunderabad-500003
G S T No. : 36ABIFM1836H1Z7

| **Supplier Details** | | | |
|---|---|---|---|
| Praful Sanitary | **Doc No** | 84061 | 181798 |
| 3-6-138/5, Himayat Nagar, Hyderabad. | **Doc Date** | 30-12-2021 | |
| | **Quote No** | NIL | |
| **GSTIN** 36ACWPG864A1ZG 40077300 | **Quote Date** | 24-12-2021 | |
| 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 | 7100 - Plumbing - HDPE - Pipe - 6Kgs pressure - 1 1/4 In - mtrs | 100.00 | 82.00 | 20.00 | 18.00 | 7,740.80 |
| | | | | | **Total Order Value . . .** | **7,740.80** |

Rupees : Seven Thousand Seven Hundred Fourty and Paise Eighty 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 Heights<br>pocharam<br>Phone. .9849497484 |
| 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 north compound wall borewell to block A lift pit for curing of slab and columns 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 invoice must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email. |

For ***Modi Realty Pocharam LLP***

Authorised Signatory

Name : ____________

Name : ____________

Accepted the above Terms And Conditions

For ***Praful Sanitary***

Date : __/__/____

# Requisition Form

| Company Name: | Modi Realty Pocharam LLP | Date: | 24-12-2021 |
|---|---|---|---|
| Site & Phase : | Niligiri Heights | Time: | 16:20 |
| Supplier: | | Req. No. | 181798 |
| 0Material required before date: | 26.12.21 | ID No. | 72385 |

| No | Description | Size | Quantity | Units | Inward No | Date |
|---|---|---|---|---|---|---|
| 1 | HDPE Pipe | 1 1/4" | 100 | mts | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | 84061. | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |

Remarks: For North Compound wall Borewell to Block - A - Lift pit for Curing of Slab and Columns Purpose

| Prepared By | Vijay Raj | Approved by | |
|---|---|---|---|
| Sign.& Date | 24.12.2021 | Sign. & Date | |

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

APPROVED
03 JAN 2022
P. PRABHAKAR
Sr. MANAGER PURCHASE

**GST INVOICE** *(DUPLICATE FOR TRANSPORTER)*

| | | |
|---|---|---|
| **Praful Sanitary**<br>3-6-429/6,SRI SAI TOWER,<br>St.No.4 HIMAYAT NAGAR<br>HYDERABAD<br>GSTIN/UIN: 36ACWPG4864A1ZG<br>State Name : Telangana, Code : 36<br>E-Mail : prafulsanitary@gmail.com | Invoice No.<br>**PS/21-22/ 902** | Dated<br>**4-Jan-22** |
| | Delivery Note<br>**Invoice** | |
| | Reference No. & Date. | Other References<br>**Credit** |
| Buyer (Bill to)<br>**Modi Reality Pocharam LLP**<br>5-4-183/3&4, IInd Floor<br>Soham Mansion, M G Road<br>Secinderabad.<br>GSTIN/UIN : 36ABIFM1836H1Z7<br>State Name : Telangana, Code : 36 | Buyer's Order No.<br>**84061** | Dated<br>**3-Jan-22** |
| | Dispatch Doc No.<br>**Invoice** | Delivery Note Date<br>**4-Jan-22** |
| | Dispatched through<br>**Self** | Destination<br>**Nilgiri Heights, Pocharam** |

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| | ***Output SGST*** | | | | | | | **590.40** |
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Tax Amount (in words) : **Indian Rupees One Thousand One Hundred Eighty and Eighty paise Only**

PRAFUL SANITARY HIMAYATNAGAR HYDERABAD-29.

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
Inward No: 10803 Dt: 5/01/22
MRN No: 10925 Dt: 7/1/22
Received By: Sign:
NILGIRI HEIGHTS

SUMMIT SALES LLP
IN WARD
No: 89486
Date: 8/01
Sign: