PURCHASE DIVISION Advice for approval for credit to supplier

Date:	1	7/2/2	Prepare	d by	Herre	a do	Serial no.		- 2080	
Supplier nam	e	P	a Jul	la. da	7 H		HO inward	no.	453	
Firm/Compar	ny	<<11	Project	Jum Fw	Sku	ρ	HO received	d date	Whin	
PO/WO date			PO/WO	No.	853		Scan ID.			
SI no.		Bill no.		Bill	date		Bill amount		Original attached	
1.		10	55	15/2	थे	" color"	10, 8041.		Yes No	
2.									□ Yes □ No	
3.				*		,	_		□ Yes □ No	
4.	A THE STATE OF THE								□ Yes □ No	
Amount A	Bills total (1	Excluding 7	Γransport & F	Iamali Char	ges):				10,8041-	
Proof of deliv	very by way	of: pDCs/	bill Steel	report RM	IC pour repor	rt 🗆 So	lid block repo	rt 🗆 Ins	stallation report	
MRN				Proof of de matches M				P¥es □ No		
nos.:	21 6 6		3798			matche	25 IVIKIN			
Amount B –C		_	rtation charge	es 					_	
Amount C –C	Other Debits	S :	8 -						_	
Amount D (D			o be credited	to the suppli	er:				10,8041-	
Amount E – l	PO / WO va	ılue:	2.						10, 804	
Amount F – I	Difference ((A-E):								
Quantity rece	eived as per	PO/WO		Yes 🗆	Excess recei	ved 🗆 Sl	nort received	□ Part 1	received	
Close PO / W	70			Z Yes 🗆	No – wait fo	r balanc	e material 🗆 (Other		
Payment - du	ie date				24/2/2					
Remarks:						,				
	del Circulation de la Profita Manie			*			2			
Approved	by Pu	rchase Offic	200000	rchase anager	MD)	Account	ant	Accounts Manager	
Name:	1	Pand	9	9						
Sign:		4			and the second s					
Date		13/2/	Ta l							
Approval lim	it Upt	o 20k	Above	20k	Above 100	k	Upto 20k		Above 20k	
Notes: 1 In ca	ase amount	to be gradit	ad to gunnling	and the bill	a total dans					

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

D.	af. I Canitan			Invoi	ce No.		Da	ated	
	raful Sanitary 6-429/6,SRI SAI TOWER,				21-22/105	5		5-Feb-22	2
	No.4 HIMAYAT NAGAR				ery Note	3	- 10)-I GD-22	<u>-</u>
	/DERABAD		100	Invo					
St	STIN/UIN: 36ACWPG4864A1ZG ate Name: Telangana, Code : 36				rence No.	& Date.	Ot	her Refe	rences
E-	Mail: prafulsanitary@gmail.com		4.34					redit	
	yer (Bill to)			Buye	r's Order N	No.		ated	
Sı	ımmit Sales LLP			8551			15	5-Feb-22	2
5-	4-187/3&4, IInd Floor, M.G Road				atch Doc N	lo.		elivery No	
	ecunderabad		423	Invo				-Feb-22	
	STIN/UIN : 36ACQFS2044C1Z7				atched thro	ough		estination	
Si	ate Name : Telangana, Code : 36			Self			CI	nerlapa	lly
				Bill o	f Lading/L	R-RR No	. M	otor Vehi	cle No.
							TS	310UA9	758
SI	Description of	HSN/SA	C	GST	Quantity	Rate	ne	r Disc. %	Amount
No.	Goods and Services	TIOI VOA		Rate	Quantity	Itale	Pe	DISC. 76	Amount
1	25mm Extension Nipple	8481		18 %	60 No:		00 No		
2	40mm Extension Nipple	8481		18 %	40 No:		00 No		_,
3	600mm Pvc Connection	3917		18 %	60 No:	120.0	00 No	2: 40 %	4,320.00
		-							9,156.00
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		Tours of						40.00	es or the gard
	Total			100	160 No:				₹ 10,804.00
Am	ount Chargeable (in words)			3.5		1			E. & O.E
In	dian Rupees Ten Thousand Eight Hundred Four Only								
	HSN/SAC	T	axab	le	Central	Tax	S	ate Tax	Total
			Value				Rate	Amou	
	81		1,836		9%	435.24	9%		5.24 870.48
39	17	4	1,320	0.00	9% 9%	388.80	9%		3.80 777.60
99					14%		9% 14%		
		Total 9	,156	6.00		824.04	1470		1,648.08
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									Dr. O. V.
								1/3/	121
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								11*	
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Cc	mpany's PAN : ACWPG4864A								or Praful Sanitary
	claration								The second second second
de	e declare that this invoice shows the actual price of the goods scribed and that all particulars are true and correct.					-			
30	SUBJECT TO HYDERA	ABAD IIIDI	enio.	TION	11.3	SAN			authorised Signatory
					15	-16	16:		
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14-02-2022 12:02:15

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14.02.22 2:32:32

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 85515 16				
3-6-138/5, Himayat Nagar, Hyde	Doc Date 14-02-2022				
		Quote No	Nil		
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	14-02-2022		
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 7026 - Plumbing - CP - Extension Nipple - 1/2 In - nos 1/2 x 1inch	60.00	62.00	35.00	18.00	2,853.24
2 7028 - Plumbing - CP - Extension Nipple - other - nos	40.00	93.00	35.00	18.00	2,853.24
3 7327 - Plumbing - PVC - Connection - 2 ft - nos	60.00	120.00	40.00	18.00	5,097.60
		Total O	rder Valu	e	10,804.08

Rupees: Ten Thousand Eight Hundred Four and Paise Eight Only.

Terms and Conditions :-

Specification /

As per details given in the quotation. Sl.no.1,2-'Camry' brand

Payment Terms

After delivery of all materials & production of bill.

Tax

All taxes included in above price.

Delivery Date

Within 2days.

Delivery Location

Summit Housing LLP

Cherlapally, Behind Kingston PG college, Hyderabad

Phone. 9618244433, Hamendra

Penality For Delay

onunity i or zoney

Transportation

Transport cost shall be borne by us.

Warranty

5yrs on Sl.no.1,2

Advance Paid

Nil

Other Terms

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

Completion Date

Nil

Measurment Security Nil 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 Summit Sales LLP

Authorised Signatory

Accepted the above Terms And Conditions

For **Praful Sanitary**

Name : _____

Date : __/__/___

Name :

Requisition Form

Comna	ny Name:	SSLLP		Requisi	Date:			09.02.2022		
1			24.0.		O F C M C M M M					
Site & Phase: SSHLP				Time:			10:00			
Supplie	er				Req.N	lo.		169459		
Material required before date: 10.01.2022			2 ID No.				73816			
No Description			Size		Quantity Ur		Inward No	Date		
1	CP-Extension Nippal		1/2"x1	>>	60	Nos				
2	CP-Extension Nippal			1/2"x1	.5'	5' 40				
3	GI-Ball cock			1/2"		30	Nos			
4	Sanitary- wall hung Rag bolts					50	Nos			
5	Sanitary- Concealed flush tank plate 85513					50	Nos			
.6	PVC-Connection			2"		60	Nos			
7	Sanitary Rag Bolts(Wash basin)			14		40	Nos	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Remar	ks: For Stock Replenes	hing purpose					(2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	APPROVED		
Prepared By N.Vanajakshi			Approved by		W	1 0 FEB 2022				
Sign.& Date 09.022022).		Sign.	& Date		SCHAM MODE			