PURCHASE DIVISION Advice for approval for credit to supplier

'Date:		12/2/22	Prepare	d by	Henry	de	Serial no.		٠	2081
Supplier nan	ne	Probab	Sam	lan	, , , , ,		HO inward	no.	1	54
Firm/Compa	iny	SSLER	Project	29 00 1	sha	P	HO receive	ed date		15/2/2
PO/WO date	•	7/2/22	PO/WO	No.		25	Scan ID.			. V / C/
SI no.		Bill no.		Bill	date		Bill amount		Origina	l attached
1.		10.	Ĺ	ıd	2122	- COLD	37 45	u	Yes	□ No
2.			1	17/	2/22			1/5	□ Yes	□ No
3.		S.				¥	_		□ Yes	□ No
4.		***					_		□ Yes	□ No
Amount A -	Bills to	otal (Excluding Tra	nsport & H	Iamali Charg	ges):				37.	5571-
Proof of deli	very by	way of: pDCs/bi	l 🗆 Steel	report RM	IC pour repo	rt 🗆 So	lid block repo	ort 🗆 Ins	stallation	
MRN			And the second s			ł	of delivery es MRN	-	Yes I	⊃ No
nos.:	0.1	S. C. T.	037	99		matche	es MRN			
		Credits : Transporta	tion charge	es						
Amount C -										
`		-C) – Amount to b	e credited t	to the suppli	er:				37,5	571-
Amount E –	PO / W	O value:	18						37, 5	55H-
Amount F –	Differe	nce (A – E):								1
Quantity rec	eived as	s per PO /WO		1			hort received		received	
Close PO / V	VO	P		₹Yes □	No – wait fo	r balanc	e material 🗆	Other		
Payment - d	ue date				24/21	12				
Remarks:										
				3						
Approved	d by	Purchase Officer	AND DESCRIPTION OF THE PARTY OF	rohase anager	MD)	Accoun	tant		anager
Name:		Ha la	43.43.1416	- Andrew						
Sign:		K	176	EB 2027	States Sent Co.					
Date		12/2/	a MINIS	H PARIK	Delicario de la constanta de l					
Approval lin	nit	Upto 20k	Above	20k	Above 100	k	Upto 20k		Above	20k

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

P-	nitan	13.12		Invoi	ce No		Dat	ted	
	arur sanitary 6-429/6,SRI SAI TOWER,					4			2
	No.4 HIMAYAT NAGAR 'DERABAD			Deliv	ery Note				
G	STIN/UIN: 36ACWPG4864A1ZG								
	ate Name:Telangana, Code:36 Mail:prafulsanitary@gmail.com			Refe	rence No.	& Date.			rences
	yer (Bill to)			Buve	r's Order I	No	_		-
	mmit Sales LLP								
	4-187/3&4, IInd Floor, M.G Road								te Date
	cunderabad STIN/UIN : 36ACQFS2044C1Z7								
	ate Name : Telangana, Code : 36			Dispa	atched thre	ough	Des	stination	
	3 ,				£ 1 = d:== //	D DD Na			
				Bill 0	r Laurig/L	K-KK NO.			
SI No.	Description of Goods and Services	HSN/S	AC		Quantity	Rate	per	Disc. %	Amount
		0.404		1.5	20.11	070.0		05.04	
1	CP Bottle Trap CP Grating Square (Plain)							1	
	25mm Extension Nipple	4.31		17 18 18 18 18					,
4	Waste Coupling Half Thread	8481		18 %					
5	600mm Pvc Connection	3917		18 %			No:	40 %	
									31 828 00
	0	-							
				100			H AR		()0.0 .
									418 908187 089 K 90808 D
	OERTIES!								V-1
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		440.00		8.1	1,71				
					220 No:			2 2 2	
	ount Chargeable (in words)								E. & O.E
In				-	Control	Toy	Cto	to Toy	Total
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84		2					9%		
73 39							1000		
99			.,02	0.00	9%	000.00	9%		
99		T-4-1	14.00	0.00	14%	004.50	14%	2.004	50 5700.04
									.52 5,729.04
Tax	Amount (in words) : Indian Rupees Five Thousand Seven H	undred	Twe	enty N	line and	Four pais	se Or	ıly '	
								1	LSAN
								//-	21
								\\\ \	*
_	1.0000000000	Sage							
	mpany's PAN : ACWPG4864A							7	or Praful Sanitary
	e declare that this invoice shows the actual price of the goods								1272.122.22
	scribed and that all particulars are true and correct.	18.43						A	uthorised Signatory
	SUBJECT TO HYDER	ABAD JU	RISDI	CTION	-	Contractor to the second	A Maritime	and the same of the same	
	This is a Computer	Generated	d Invoi	ce	INW	ARD	and the state of t		
	ANT SALA	1			1001	2 Dts	5/2	124	
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	15/ WARD 1-1	The state of the s	8 6 TO T	V No:	10379	9 Dt:	16	-	
	100 NOT 111.36 17	18	IVIT	Mark Market		Sign	: (1	Aveland Aveland
	Date:	4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Rec	erved		1	and the same of the same of	-	
	A Cirms	1			- Contract	SALES	TT)	35

Purchase Order

796			
Page	37 1	Of 1	

07-02-2022 10:49:59

Original

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	85225	169439
3-6-138/5, Himayat Nagar, I	Doc Date	07-02-2022		
		Quote No	Nil	
GSTIN 36ACWPG864A1ZG	40077300	Quote Date	07-02-202	22
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 10043 - Plumbing - CP - Bottel trap - NA - nos	20.00	876.00	25.00	18.00	15,505.20
2 7041 - Plumbing - CP - Sq. Jali without hole - 6 In x6 In -	50.00	190.00	35.00	18.00	7,286.50
3 7026 - Plumbing - CP - Extension Nipple - 1/2 In - nos 1/2	60.00	62.00	35.00	18.00	2,853.24
4 7047 - Plumbing - CP - Waste coupling - 1/2 thread - nos	30.00	275.00	30.00	18.00	6,814.50
5 7327 - Plumbing - PVC - Connection - 2 ft - nos	60.00	120.00	40.00	18.00	5,097.60
upees : Thirty Seven Thousand Five Hundred Fifty Seven and F		Total Or	der Value	e	37,557.04

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 Nil

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 LLF Authorised Signato

Accepted the above Terms And Conditions

For Praful Sanitary

Name :	708	02	2022

Name :

Date : __/__/__

Requisition Form

Compa	any Name:	SSLLP	ICC	quisi	Date:	m					
Site &	Phase :	SSHLP						02.02.2022			
Supplier		SSILI			Time:			10:00			
Materi	ial required before da	ite:	0.01.2022		Req.No.			169439			
No			0.01.2022	1022 ID No.							
		scription		Size	,	Quantity	Units	73592 Inward No	Date		
y	CP-Wall mixtur	T-MARIA MARIA MARI				20	Nos				
X	CP-Sink coak w	ith swivel spou	it			30	Nos				
3	CP-short body					9	Nos				
4	CP-shower arm					20					
15	CP-Bib coak	(03)	٨				Nos				
8	CP-Pillar coak	8522				10	Nos				
	CP-Angle coak					20	Nos				
	CP-Bottle Trap					120	Nos				
						20	Nos				
	CP-double square	7	5-1.			50	Nos				
1	CP-extension nip	221	, 1/2	"x1"		60	Nos				
1	CP-Wash basin w	aste coupling				30	Nos				
2 (CP-Health faucet					20	Nos				
3 F	VC -connection		2	,,							
marks:	For stock Replenishi	ng purpose				60	Nos				
pared I	Ву	N. Vanajakshi		1			T	APPROVED	34		
n.& Da		02.02 2022		-	pproved b		- Contraction	23.692			
: On re	eceipt of material at s	ite write inward n	IImher and J.	Sig	gn. & Dat	e		0 3 FEB 202	7		
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