

**PURCHASE DIVISION**  
Advice for approval for credit to supplier

(2)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  |                                                                                                                                                                 |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------|------------------|-------------|------------------|------------------|----|------------|------------------|-------|------|--|--|--|--|-------|------|-------------|--|--|--|------|--------|--|--|--|--|----------------|----------|-----------|------------|----------|-----------|
| Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 9/3/22           | Prepared by                                                                                                                                                     | Manu                          | Serial no.                                                          | 2729             |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Supplier name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | SSHP             |                                                                                                                                                                 |                               | HO inward no.                                                       |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Firm/Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | SOV              | Project                                                                                                                                                         | SOVHP                         | HO received date                                                    |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| PO/WO date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1/2/22           | PO/WO No.                                                                                                                                                       | 85086                         | Scan ID.                                                            |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Sl no.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Bill no.         | Bill date                                                                                                                                                       | Bill amount                   | Original attached                                                   |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 22481            | 8/3/22                                                                                                                                                          | 5487/-                        | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| 2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                                                                                                                                                                 |                               | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| 3.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                                                                                                                                                                 |                               | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| 4.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                                                                                                                                                                 |                               | <input type="checkbox"/> Yes <input type="checkbox"/> No            |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Amount A – Bills total (Excluding Transport & Hamali Charges):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |                                                                                                                                                                 |                               | 5487                                                                |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Proof of delivery by way of: <input checked="" type="checkbox"/> DCs/bill <input type="checkbox"/> Steel report <input type="checkbox"/> RMC pour report <input type="checkbox"/> Solid block report <input type="checkbox"/> Installation report                                                                                                                                                                                                                                                                                                                      |                  |                                                                                                                                                                 |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| MRN nos.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 104636           |                                                                                                                                                                 | Proof of delivery matches MRN | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Amount B – Other Credits : Transportation charges                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                  |                                                                                                                                                                 |                               | -                                                                   |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Amount C – Other Debits :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                                                                                                                                                 |                               | -                                                                   |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                  |                                                                                                                                                                 |                               | 5487/-                                                              |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Amount E – PO / WO value:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                                                                                                                                                                 |                               | 5487/-                                                              |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Amount F – Difference (A – E):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                  |                                                                                                                                                                 |                               | -                                                                   |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Quantity received as per PO / WO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Part received |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Close PO / WO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> Other                                  |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Payment – due date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  | 14/3/22                                                                                                                                                         |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Remarks:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  |                                                                                                                                                                 |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| <table border="1"> <tr> <td>Approved by</td> <td>Purchase Officer</td> <td>Purchase Manager</td> <td>MD</td> <td>Accountant</td> <td>Accounts Manager</td> </tr> <tr> <td>Name:</td> <td>Manu</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sign:</td> <td>Manu</td> <td>10 MAR 2022</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Date</td> <td>9/3/22</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Approval limit</td> <td>Upto 20k</td> <td>Above 20k</td> <td>Above 100k</td> <td>Upto 20k</td> <td>Above 20k</td> </tr> </table> |                  |                                                                                                                                                                 |                               |                                                                     |                  | Approved by | Purchase Officer | Purchase Manager | MD | Accountant | Accounts Manager | Name: | Manu |  |  |  |  | Sign: | Manu | 10 MAR 2022 |  |  |  | Date | 9/3/22 |  |  |  |  | Approval limit | Upto 20k | Above 20k | Above 100k | Upto 20k | Above 20k |
| Approved by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Purchase Officer | Purchase Manager                                                                                                                                                | MD                            | Accountant                                                          | Accounts Manager |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Manu             |                                                                                                                                                                 |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Sign:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Manu             | 10 MAR 2022                                                                                                                                                     |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 9/3/22           |                                                                                                                                                                 |                               |                                                                     |                  |             |                  |                  |    |            |                  |       |      |  |  |  |  |       |      |             |  |  |  |      |        |  |  |  |  |                |          |           |            |          |           |
| Approval limit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Upto 20k         | Above 20k                                                                                                                                                       | Above 100k                    | 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.

## TAX INVOICE

## Summit Sales LLP

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G.Road, Secunderabad - 500003

ORIGINAL INVOICE

Email: purchase@modiproperties.com

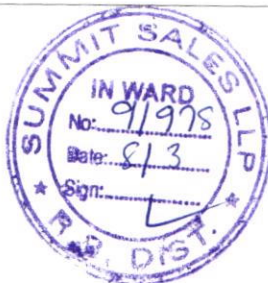
Supplier / Customer / Transporter - Copy

PAN: ACQFS2044C GSTIN/UNI: 36ACQFS2044C1Z7

1 of 1 :

| Customer Details                                       |                                                       |          |                      | Invoice No.    | 22481      |        |         |
|--------------------------------------------------------|-------------------------------------------------------|----------|----------------------|----------------|------------|--------|---------|
| Silver Oak Villas LLP                                  |                                                       |          |                      | Invoice Date.  | 08-03-2022 |        |         |
| Sy No, 291, Phase IX, Cherlapally, Hyderabad           |                                                       |          |                      | PO No.         | 85086      |        |         |
|                                                        |                                                       |          |                      | PO Date.       | 01-02-2022 |        |         |
|                                                        |                                                       |          |                      | Req ID         | 73446      |        |         |
|                                                        |                                                       |          |                      | Req Date       | 01-02-2022 |        |         |
|                                                        |                                                       |          |                      | Loc Req No     | 156621     |        |         |
| GSTIN : 36ADBFS3288A2Z7                                |                                                       |          |                      | PAN ADBFS3288A |            |        |         |
|                                                        | Description of Goods                                  | HSN/SAC  | Qty                  | Rate           | Gross      | Tax%   | Tax Amt |
| 1                                                      | 7300 - Plumbing - sanitary - Flush tank conceled - NA | 39229000 | 3                    | 1550.00        | 4,650.00   | 18     | 837.00  |
|                                                        | Hindware Flush Tank ( Ceramic )                       |          |                      |                |            |        |         |
| 2                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 3                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 4                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 5                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 6                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 7                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 8                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 9                                                      |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 10                                                     |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 11                                                     |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 12                                                     |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 13                                                     |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 14                                                     |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| 15                                                     |                                                       |          |                      |                |            |        |         |
|                                                        |                                                       |          |                      |                |            |        |         |
| IGST                                                   | CGST                                                  | SGST     | Total Taxable Amount | 4,650.00       |            | 837.00 |         |
|                                                        | 418.50                                                | 418.50   | Total Invoice Amount |                | 5,487.00   |        |         |
| Rupees : Five Thousand Four Hundred Eighty Seven Only. |                                                       |          |                      |                |            |        |         |

Subject to Hyderabad Jurisdiction



for Summit Sales LLP

Authorised signatory

# Purchase Order



85086

31.01.22 4:50:17

Page(s) 1 Of 1

01-02-2022 16:39:32

0

From Company : **Silver Oak Villas LLP**  
5-4-187/3 & 4, IInd Floor, M.G.Road, Secunderabad - 500003  
G S T No. : 36ADBFS3288A2Z7

**Supplier Details**

Summit Sales LLP  
5-4-187/3&4, II nd floor, Soham Mansion, MG Road, Secunderabad

**GSTIN** 36ACQFS2044C1Z7

040-66335551

9618244433

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 85086      | 156621 |
| <b>Doc Date</b>   | 01-02-2022 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 28-01-2022 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Hamendra,Prabhakar**

Purchase Order for the Supply of following Items.

| Item Name                                                                                        | Qty  | Rate     | Dis% | GST   | Amount          |
|--------------------------------------------------------------------------------------------------|------|----------|------|-------|-----------------|
| 1 7300 - Plumbing - sanitary - Flush tank conceled - NA - nos<br>Hindware Flush Tank ( Ceramic ) | 3.00 | 1,550.00 | 0.00 | 18.00 | 5,487.00        |
| <b>Total Order Value . . .</b>                                                                   |      |          |      |       | <b>5,487.00</b> |

Rupees : Five Thousand Four Hundred Eighty Seven Only.

**Terms and Conditions :-****Specification /** All items shall be of "Prince" / "Gebrittee" brand.**Payment Terms** After Delivery & Production of bill**Tax** Inclusive of all taxes**Delivery Date** Next Day.

**Delivery Location** Silver Oak Villas Phase - IX  
Sy. No. 291, Cherlapally, Hyderabad, next to Govt. of india mint  
Phone. Contact: Security 65908777, 9502288244 Sanjay

**Penalty For Delay** Nil**Transportation** Transport cost shall be borne by us.**Warranty** Nil**Advance Paid** Nil**Other Terms** We reserve the right to reject items not conforming to quality and specifications. Above order for V.No 29 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 **Silver Oak Villas LLP**

Authorised Signatory

Name :

01/02/2022

Name :

Accepted the above Terms And Conditions

For **Summit Sales LLP**

Date : \_/\_/



# Requisition Form

| Company Name:                     |                            | Silver Oak Villas LLP  |          | Date:        |           | 01-02-2022 |       |
|-----------------------------------|----------------------------|------------------------|----------|--------------|-----------|------------|-------|
| Site & Phase :                    |                            | Silver Oak Villas-I&II |          | Time:        |           | 10.00      |       |
| Supplier                          |                            |                        |          | Req. No.     |           | 156621     |       |
| Material required before date:    |                            |                        | Urgent   |              | ID No.    |            | 73446 |
| No                                | Description                | Size                   | Quantity | Units        | Inward No | Date       |       |
| 1                                 | EWC commode tank(Hindware) |                        | 03       | Nos          |           |            |       |
| 2                                 |                            |                        |          |              |           |            |       |
| 3                                 |                            |                        |          |              |           |            |       |
| 4                                 |                            |                        |          |              |           |            |       |
| 5                                 |                            |                        |          |              |           |            |       |
| 6                                 |                            |                        |          |              |           |            |       |
| 7                                 |                            |                        |          |              |           |            |       |
| 8                                 |                            |                        |          |              |           |            |       |
| 9                                 |                            |                        |          |              |           |            |       |
| 10                                |                            |                        |          |              |           |            |       |
| Remarks: -For villa no 29 purpose |                            |                        |          |              |           |            |       |
| Prepared By                       |                            | B.Meenakshi            |          | Approved by  |           |            |       |
| Sign.& Date                       |                            | 01-02-2022             |          | Sign. & Date |           |            |       |

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

**Summit Sales LLP**

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G. Road, Secunderabad - 500003

E-mail: purchase@modiproperties.com

1 of 1 : 08-03-2022

Supplier / Customer / Transporter - Copy

GSTIN/UNE: 36ACQFS2044C1Z7

**Customer Details**

Silver Oak Villas LLP

Sy No, 291, Phase IX, Cherlapally, Hyderabad

GSTIN : 36ADBFS3288A2Z7

|            |            |
|------------|------------|
| DC No.     | 19231      |
| DC Date    | 08-03-2022 |
| PO No.     | 85086      |
| PO Date    | 01-02-2022 |
| Req ID     | 73446      |
| Req Date   | 01-02-2022 |
| Loc Req No | 156621     |

## Description of Goods

HSN/SAC  
39229000

Qty

3

1 7300 - Plumbing - sanitary - Flush tank connected - NA - nos

2

3

4

5

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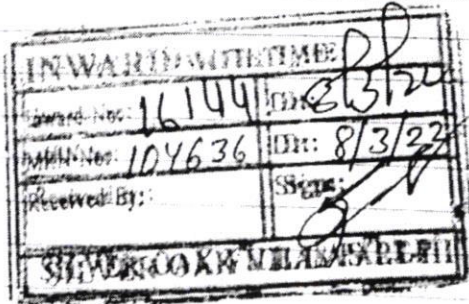
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for Summit Sales LLP



Authorised signatory

Subject to Hyderabad Jurisdiction