

## Form for closure of purchase order

|                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------|--------------------------------|---------|
| Data required from site/engineers:                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| PO no.:                                                                                                                                                                                                                                    | 85682                                                                                                                                                                                                                                                                                                        | PO date: | 18/2/22                                                   | Req. no.:                      | 192844  |
| Advice Scan ID                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| MRN nos. related to PO                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Part material received.                                                                                                                                                                                                                                                                                      |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Full material received.                                                                                                                                                                                                                                                                                      |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Material not received.                                                                                                                                                                                                                                                                                       |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Close PO – Balance material will be re-ordered by new requisition.                                                                                                                                                                                                                                           |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Cancel PO, Material not required.                                                                                                                                                                                                                                                                            |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Cancel PO, Material will be re-ordered by new requisition.                                                                                                                                                                                                                                                   |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Keep PO open, Material required.                                                                                                                                                                                                                                                                             |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Keep PO open, Work under progress.                                                                                                                                                                                                                                                                           |          |                                                           |                                |         |
| Remarks by engineer: Total material delivered, close the po.                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| Notes: 1. Provide details of material received by way of separate attachment. 2. Provide hardcopy of DCs/proof of delivery + PO. 3. Provide copies of invoices if available. 4. This entire set to be sent by way of hard copy to Ashaiya. |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| Prepared by                                                                                                                                                                                                                                | Sign                                                                                                                                                                                                                                                                                                         | Date     | Project manager                                           | Sign                           | Date    |
| A. Tanaké                                                                                                                                                                                                                                  | AP                                                                                                                                                                                                                                                                                                           | 20/4/22  | M. Ramprasad                                              | [Signature]                    | 20/4/22 |
| Data required from accounts:                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Checked with E&D for receipt of bills.                                                                                                                                                                                                                                                                       |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Bills not received against this PO.                                                                                                                                                                                                                                                                          |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Part bill received against this PO.                                                                                                                                                                                                                                                                          |          | Bill nos.                                                 |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | All bills received against this PO.                                                                                                                                                                                                                                                                          |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Advance paid against this PO.                                                                                                                                                                                                                                                                                |          | Amount paid                                               |                                |         |
| Remarks by Accountants:                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| Notes: 1. Pos issued for false ceiling and such works may have been processed by E&D. Check before filling the above.                                                                                                                      |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| Prepared by                                                                                                                                                                                                                                | Sign                                                                                                                                                                                                                                                                                                         | Date     | Accounts manager (approval required for PO more than 10k) | Sign                           | Date    |
| Rajyashanti                                                                                                                                                                                                                                | [Signature]                                                                                                                                                                                                                                                                                                  | 21/4     |                                                           |                                |         |
| Advice by MD - action to be taken by purchase:                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Get certified bill from supplier (not original).                                                                                                                                                                                                                                                             |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Prepare bill in SLLP for material supplied.                                                                                                                                                                                                                                                                  |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Get proof of delivery from site.                                                                                                                                                                                                                                                                             |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Barcoded PO missing – get certified copy from Accounts.                                                                                                                                                                                                                                                      |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Thereafter, prepare advice to credit to supplier and send to HO for processing.                                                                                                                                                                                                                              |          |                                                           |                                |         |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                        | Close PO                                                                                                                                                                                                                                                                                                     |          | <input type="checkbox"/>                                  | Keep PO open, Material awaited |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Send barcoded PO to MDs desk. PO to be closed thereafter.                                                                                                                                                                                                                                                    |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Accounts to be reconciled with supplier. Suppliers ledger required from 1.4.2021.                                                                                                                                                                                                                            |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Accounts to be reconciled with supplier. Suppliers ledger required from 1.4.2020.                                                                                                                                                                                                                            |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | RMC supplier – suppliers ledger required from 1.4.2020. Process bill after thoroughly checking both the ledgers and all pour reports. Pour reports from day one to be thoroughly checked with Pos/Bills. Thereafter, prepare advice to credit to supplier and send to HO for processing. Close all open POs. |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | E&D to check receipt of bill and enter comments below.                                                                                                                                                                                                                                                       |          |                                                           |                                |         |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Details of material supplied and balance material to be supplied is required.                                                                                                                                                                                                                                |          |                                                           |                                |         |
| Remarks:                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
|                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |
| Prepared by                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                              | Sign     |                                                           | Date                           |         |
|                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |         |

APPROVED BY  
25 APR 2022  
SOHAM MODI  
MANAGING DIRECTOR

## Purchase Order

Page(s) 1 of 2

20-04-2022 17:05:44

Original / Office Copy / Purchase Div.Copy

From Company : **Modi Reality Mallapur LLP**  
5-4-187/3&3, II nd floor, Soham Mansion, MG Road, Secunderabad.  
G S T No. : 36AAEFM1459R1ZP

| Supplier Details                                                                                                                                    |            |            |        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|--------|
| Dilpreet Tubes<br>Plot #8, IDA Nacharam, Hyderabad-76.<br><br>GSTIN 36AABCD6242R1Z8 23225792/27170988<br>65226846,kunalbatsh88@gmail.com 9949170500 | Doc No     | 85682      | 192844 |
|                                                                                                                                                     | Doc Date   | 18-02-2022 |        |
|                                                                                                                                                     | Quote No   | Nil        |        |
|                                                                                                                                                     | Quote Date | 18-02-2022 |        |
|                                                                                                                                                     | SupplyType | Supply     |        |

Kind Attn : Rahul Mehta/Mr.Kunal.kunalbatsh88@gmail.com

Purchase Order for the Supply of following Items.

| Item Name                                                                                         | Qty   | Rate  | Dis% | GST   | Amount   |
|---------------------------------------------------------------------------------------------------|-------|-------|------|-------|----------|
| 1 8086 - Steel - other - MS sections - other - kgs<br>ISMB - 100mm X 200mm - 7'5" Length - 02 nos | 95.00 | 67.00 | 0.00 | 18.00 | 7,510.70 |
| Total Order Value . . .                                                                           |       |       |      |       | 7,510.70 |

Rupees : Seven Thousand Five Hundred Ten and Paise Seventy Only.

### Terms and Conditions :-

**Specification /** Item shall be of 47.50kgs approx. weight per each length. weighment slip must be attach!

**Payment Terms** After Delivery & Production of bill

**Tax** All taxes included in above price.

**Delivery Date** Next day.

**Delivery Location** Gulmohar Residency  
Survey No 19, Mallapur, Hyderabad. Next to NFC Railway Over Bridge  
Phone. Contact: Security \_\_\_\_\_, Admin 9502211011

**Penalty For Delay** Nil

**Transportation** Extra .

**Warranty** Nil

For **Modi Reality Mallapur LLP**  
Authorised Signatory

Accepted the above Terms And Conditions  
For **Dilpreet Tubes**

Name : \_\_\_\_\_

Name : \_\_\_\_\_

Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

## Purchase Order

Page(s) 2 Of 2

20-04-2022 17:05:44

Original / Office Copy / Purchase Div.Copy

Advance Paid Nil

Other Terms We reserve the right to reject items not conforming to quality and specifications. Above order for B block lift 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 **Modi Reality Mallapur LLP**

Authorised Signatory

Accepted the above Terms And Conditions

For **Dilpreet Tubes**

Name : \_\_\_\_\_

Name : \_\_\_\_\_

Date : \_\_/\_\_/\_\_

Subject to Hyderabad Jurisdiction Only.

(DUPLICATE FOR TRANSPORTER)

## TAX INVOICE

## DILPREET TUBES PVT. LTD.

Regd. Office &amp; Factory: Plot # 8, Road # 5, IDA Nacharam, Hyderabad - 500 076.

Telephone: 040-27177358, Fax: 040-27170988

E-Mail: dilpreet\_tubes@rediffmail.com, harimehta15@gmail.com



CIN : U27109TG2002PTC039529

GSTIN : 36AABCD6242R1Z3

PAN : AABCD6242R

State Name: TELANGANA., Code: 36

Invoice No. DT/ 98

Invoice Date : 22-Feb-2022

E-Way Bill No. :

Name and Address of Buyer

MODI REALITY MALLAPUR LLP

5-4-187/3 &amp; 4, II ND FLOOR, SOHAM MANSION,

MG ROAD, SECUNDERABAD-500003.

SITE: SURVEY NO. 19, MALLAPUR, HYDERABAD-500076.

GSTIN : 36AAEFM1459R1ZP

State Name: Telangana

State Code: 36

Order No.: 85682

Date: 18-2-2022

L R No. :

Date:

Vehicle No.: TS 08 UE 4544

Delivery At:

| SI No. | Description of Goods                 | HSN Code | Packages Bundles | Total Qty in M. T. | Assess. Val per M. T. | Assessable Value |
|--------|--------------------------------------|----------|------------------|--------------------|-----------------------|------------------|
| 1      | MS ANGLE SHAPES & SCTIONS            | 72162100 | LOOSE            | 0.110 MT           | 67,000.00             | 7,370.00         |
|        | FREIGHT Collection / Loading Charges |          |                  |                    |                       | 7,370.00         |
|        | CGST Output @ 9%                     |          |                  |                    |                       | 400.00           |
|        | SGST Output @ 9%                     |          |                  |                    |                       | 699.00           |
|        |                                      |          |                  |                    |                       | 699.00           |
|        |                                      |          |                  |                    |                       | 9,168.00         |
|        |                                      |          |                  |                    |                       | E&OE             |

Total Invoice Value in Words

Indian Rupees Nine Thousand One Hundred Sixty Eight Only.

Narration:

| HSN/SAC  | Taxable Value | Central Tax Rate | Central Tax Amount | State Tax Rate | State Tax Amount | Total Tax Amount |
|----------|---------------|------------------|--------------------|----------------|------------------|------------------|
| 72162100 | 7,370.00      | 9%               | 663.02             | 9%             | 663.02           | 1,326.04         |
|          | 400.00        | 9%               | 35.98              | 9%             | 35.98            | 71.96            |
| Total    | 7,770.00      |                  | 699.00             |                | 699.00           | 1,398.00         |

Tax Amount (in words) : Indian Rupees One Thousand Three Hundred Ninety Eight Only

We declare that this invoice shows the actual price of the goods described and that all particulars are true and correct.

Our Bank Details

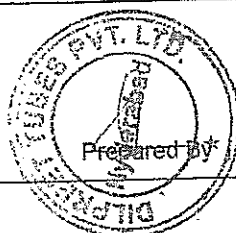
Bank Name : Axis Bank Ltd.

Bank A/c No. : 917030062563088

Bank Branch : Corporate Banking Hyderabad. IFSCCode:UTIB0001634

For Dilpreet Tubes Pvt. Ltd.

Receiver's Signature



Authorised Signatory