

## Form for closure of purchase order

|                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------|--------------------------------|--------|
| Data required from site/engineers:                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
| PO no.:                                                                                                                                                                                                                                    | 85865                                                                                                                                                                                                                                                                                                        | PO date: | 24/2/22                                                   | Req. no.:                      | 164585 |
| MRN nos. related to PO                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Part material received.                                                                                                                                                                                                                                                                                      |          |                                                           |                                |        |
| <input 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 checked="" type="checkbox"/>                                                                                                                                                                                                        | Keep PO open. Material required.                                                                                                                                                                                                                                                                             |          |                                                           |                                |        |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Keep PO open. Work under progress.                                                                                                                                                                                                                                                                           |          |                                                           |                                |        |
| Remarks by engineer: Material required.                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
| 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   |
| Sidewi                                                                                                                                                                                                                                     | (85)                                                                                                                                                                                                                                                                                                         | 6/4/22   | T. MATHO                                                  | Nukulw                         | 6/4/22 |
| Data required from accounts:                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Checked with E&D for receipt of bills.                                                                                                                                                                                                                                                                       |          |                                                           |                                |        |
| <input 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   |
|                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
| Advice by MD - action to be taken by purchase:                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Get certified bill from supplier (not original).                                                                                                                                                                                                                                                             |          |                                                           |                                |        |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Prepare bill in SSLLP for material supplied.                                                                                                                                                                                                                                                                 |          |                                                           |                                |        |
| <input type="checkbox"/>                                                                                                                                                                                                                   | Get proof of delivery from site.                                                                                                                                                                                                                                                                             |          |                                                           |                                |        |
| <input 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                           |        |
|                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                              |          |                                                           |                                |        |



# Purchase Order

07-03-2022 17:23:21

Original / Office Copy / Purchase Div. Copy

Company : **G V Reserch Centers Pvt Ltd**  
5-4-187/3&4, II nd Floor, Soham Mansion, MG Road, Secunderabad-500003  
G S T No. : 36AAHCG4562D1ZP

## Supplier Details

Doshi Brothers  
Ground floor 4-1-575/488-492, Troop bazar, Hyderabad- 500001

**GSTIN** 36AABFD2573Q1Z2  
9885270300

9885270300

|            |            |        |
|------------|------------|--------|
| Doc No     | 85865      | 164585 |
| Doc Date   | 24-02-2022 |        |
| Quote No   | Q86221-1   |        |
| Quote Date | 24-02-2021 |        |
| SupplyType | Supply     |        |

**Kind Attn : Vikram Doshi**

Purchase Order for the Supply of following Items.

| Item Name                                                              |                                                                                          | Qty  | Rate      | Dis%  | GST   | Amount                                   |
|------------------------------------------------------------------------|------------------------------------------------------------------------------------------|------|-----------|-------|-------|------------------------------------------|
| 1                                                                      | 7321 - Plumbing - sanitary - Washbasin - other - nos<br>75374IN-1-0, Forefront Sq W/Deck | 2.00 | 12,190.00 | 40.00 | 18.00 | 17,261.04                                |
| Rupees : Seventeen Thousand Two Hundred Sixty One and Paise Four Only. |                                                                                          |      |           |       |       | <b>Total Order Value . . . 17,261.04</b> |

## Terms and Conditions :-

|                       |                                                                                                                                                                                                                                                 |
|-----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Specification / Brand | Brand will be Kohler as mentioned.                                                                                                                                                                                                              |
| Payment Terms         | 50% Advance balance after delivery                                                                                                                                                                                                              |
| Tax                   | GST Included in the above prices                                                                                                                                                                                                                |
| Delivery Date         | With in 7 days                                                                                                                                                                                                                                  |
| Delivery Location     | Innapolis<br>Sy no-542, Genome Valley, Thurkapally, Hyderabad, Telangana<br>Phone. Nagamani(Engineer) - 7981951035                                                                                                                              |
| Penalty For Delay     | Nil                                                                                                                                                                                                                                             |
| Transportation Cost   | Included in the above prices                                                                                                                                                                                                                    |
| Warranty              | One year manufacturing warranty                                                                                                                                                                                                                 |
| Advance Paid          | Rs. 8630.50/- by cheque/RTGS.....Dated.....                                                                                                                                                                                                     |
| Other Terms           | We reserve the right to reject items not conforming to quality and specifications, damage is in suppliers account, above order is for Cafeteria wash basin work purpose                                                                         |
| Completion Date       | Nil                                                                                                                                                                                                                                             |
| Insurance             | 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 **G V Reserch Centers Pvt Ltd**  
Authorised Signatory

Accepted the above Terms And Conditions  
For **Doshi Brothers**

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

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

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

## Purchase Order

Page(s) 1 Of 1

24-02-2022 14:07:41

Original /

From Company : **G V Reserch Centers Pvt Ltd**  
5-4-187/3&4, II nd Floor, Soham Mansion, MG Road, Secunderabad-500003  
G S T No. : 36AAHCG4562D1ZP



85865  
14.02.22 2:36:59

### Supplier Details

Doshi Brothers  
Ground floor 4-1-575/488-492, Troop bazar, Hyderabad- 500001

**GSTIN** 36AABFD2573Q1Z2

9885270300

9885270300

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 85865      | 164585 |
| <b>Doc Date</b>   | 24-02-2022 |        |
| <b>Quote No</b>   | Q86221-1   |        |
| <b>Quote Date</b> | 24-02-2021 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Vikram Doshi**

Purchase Order for the Supply of following Items.

| Item Name                                                                                  | Qty  | Rate      | Dis%  | GST   | Amount           |
|--------------------------------------------------------------------------------------------|------|-----------|-------|-------|------------------|
| 1 7321 - Plumbing - sanitary - Washbasin - other - nos<br>75374IN-1-0, Forefront Sq W/Deck | 2.00 | 12,190.00 | 40.00 | 18.00 | 17,261.04        |
| <b>Total Order Value . . .</b>                                                             |      |           |       |       | <b>17,261.04</b> |

Rupees : Seventeen Thousand Two Hundred Sixty One and Paise Four Only.

### Terms and Conditions :-

**Specification /** Brand will be Kohler as mentioned.

**Payment Terms** 50% Advance balance after delivery

**Tax** GST Included in the above prices

**Delivery Date** With in 7 days

**Delivery Location** Innopolis  
Sy no-542, Genome Valley, Thurkapally, Hyderabad, Telangana  
Phone. Nagamani(Engineer) - 7981951035

**Penalty For Delay** Nil

**Transportation** Included in the above prices

**Warranty** One year manufacturing warranty

**Advance Paid** Rs. 8630.50/- by cheque/RTGS.....Dated.....

**Other Terms** We reserve the right to reject items not conforming to quality and specifications, damage is in suppliers account, above ord is for Cafeteria wash basin work 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 **G V Reserch Centers Pvt Ltd**

Authorised Signatory

Name :

24/02/2022

Name :

Accepted the above Terms And Conditions

For **Doshi Brothers**

Date : \_/\_/

[illegible]

**Note:**

APPROVED  
18 FEB 2022  
P. PRABHAKAR  
Sr. MANAGER PURCHASE