

PURCHASE DIVISION  
Advice for approval for credit to supplier



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                  |                  |          |                                                                                                                                                                 |                               |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|---------------|---------------------------------------------------------------------|---------------------------------------------------------------------|--|-------------|------------------|------------------|----|------------|------------------|-------|------------|--|--|--|--|-------|--|--|--|--|--|------|----------|--|--|--|--|----------------|----------|------------|----------|-----------|--|
| Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  | 20/01/23         |          | Prepared by                                                                                                                                                     | Asbjayothi                    |               | Serial no.                                                          | 13425                                                               |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Supplier name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | SSLLP            |          |                                                                                                                                                                 |                               | HO inward no. |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Firm/Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                  | GVRC             |          | Project                                                                                                                                                         | Innapolis                     |               | HO received date                                                    |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| PO/WO date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                  | 03/01/23         |          | PO/WO No.                                                                                                                                                       | 95718                         |               | Scan ID.                                                            |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Sl no.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Bill no.         |                  |          | Bill date                                                                                                                                                       |                               | Bill amount   |                                                                     | Original attached                                                   |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 28117            |                  |          | 09/01/23                                                                                                                                                        |                               | 3,70,709/-    |                                                                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| 2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                  |                  |          |                                                                                                                                                                 |                               | 1             |                                                                     | <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):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  |                  |          |                                                                                                                                                                 |                               |               | 3,70,709/-                                                          |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Proof of delivery by way of: <input 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.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 116053           |                  |          |                                                                                                                                                                 | 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                  |                  |          |                                                                                                                                                                 |                               |               | 3,70,709/-                                                          |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Amount E – PO / WO value:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                  |                  |          |                                                                                                                                                                 |                               |               | 3,70,709/-                                                          |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                  |                  |          | 30/01/23                                                                                                                                                        |                               |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Remarks:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                  |                  |          | Final bill                                                                                                                                                      |                               |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <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 colspan="2">Asbjayothi</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sign:</td> <td colspan="2"></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Date</td> <td colspan="2">26/01/23</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Approval limit</td> <td>Upto 20k</td> <td>Above 100k</td> <td>Upto 20k</td> <td>Above 20k</td> <td></td> </tr> </table> |                  |                  |          |                                                                                                                                                                 |                               |               |                                                                     |                                                                     |  | Approved by | Purchase Officer | Purchase Manager | MD | Accountant | Accounts Manager | Name: | Asbjayothi |  |  |  |  | Sign: |  |  |  |  |  | Date | 26/01/23 |  |  |  |  | Approval limit | Upto 20k | Above 100k | Upto 20k | Above 20k |  |
| Approved by                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Purchase Officer | Purchase Manager | MD       | Accountant                                                                                                                                                      | Accounts Manager              |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Asbjayothi       |                  |          |                                                                                                                                                                 |                               |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Sign:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                  |                  |          |                                                                                                                                                                 |                               |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 26/01/23         |                  |          |                                                                                                                                                                 |                               |               |                                                                     |                                                                     |  |             |                  |                  |    |            |                  |       |            |  |  |  |  |       |  |  |  |  |  |      |          |  |  |  |  |                |          |            |          |           |  |
| Approval limit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Upto 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

Email: purchase@modiproperties.com

ORIGINAL INVOICE

Supplier / Customer / Transporter - Copy

GSTIN/UNI: 36ACQFS2044C1Z7

1 of 1 : 09-01-2023

| Customer Details                                                                   |                             |           |                      | Invoice No.   | 28117      |      |           |
|------------------------------------------------------------------------------------|-----------------------------|-----------|----------------------|---------------|------------|------|-----------|
| GV Research center Pvt Ltd                                                         |                             |           |                      | Invoice Date. | 09-01-2023 |      |           |
| Sy No. 542, Genome vallaey, Thurkapally, Hyderabad                                 |                             |           |                      | PO No.        | 95718      |      |           |
| GSTIN : 36AAHCG4562D1ZP                                                            |                             |           |                      | PO Date.      | 03-01-2023 |      |           |
|                                                                                    |                             |           |                      | Req ID        | 83070      |      |           |
|                                                                                    |                             |           |                      | Req Date      | 02-01-2023 |      |           |
|                                                                                    |                             |           |                      | Loc Req No    | 206619     |      |           |
|                                                                                    | Description of Goods        | HSN/SAC   | Qty                  | Rate          | Gross      | Tax% | Tax Amt   |
| 1                                                                                  | 404600 - TLFL-Tiles - Floor | 69071090  | 235                  | 1020.00       | 239,700.00 | 18   | 43,146.00 |
|                                                                                    | 163-boxes                   |           |                      |               |            |      |           |
| 2                                                                                  | 858500 - TLFL-Tiles - Floor | 69071090  | 73                   | 1020.00       | 74,460.00  | 18   | 13,402.80 |
|                                                                                    | 50-boxes                    |           |                      |               |            |      |           |
| 3                                                                                  |                             |           |                      |               |            |      |           |
| 4                                                                                  |                             |           |                      |               |            |      |           |
| 5                                                                                  |                             |           |                      |               |            |      |           |
| 6                                                                                  |                             |           |                      |               |            |      |           |
| 7                                                                                  |                             |           |                      |               |            |      |           |
| 8                                                                                  |                             |           |                      |               |            |      |           |
| 9                                                                                  |                             |           |                      |               |            |      |           |
| 10                                                                                 |                             |           |                      |               |            |      |           |
| 11                                                                                 |                             |           |                      |               |            |      |           |
| 12                                                                                 |                             |           |                      |               |            |      |           |
| 13                                                                                 |                             |           |                      |               |            |      |           |
| 14                                                                                 |                             |           |                      |               |            |      |           |
| 15                                                                                 |                             |           |                      |               |            |      |           |
| IGST                                                                               | CGST                        | SGST      | Total Taxable Amount |               | 314,160.00 |      | 56,548.80 |
|                                                                                    | 28,274.40                   | 28,274.40 | Total Invoice Amount |               | 370,708.80 |      |           |
| Rupees : Three Lakh(s) Seventy Thousand Seven Hundred Eight and Paise Eighty Only. |                             |           |                      |               |            |      |           |

for Summit Sales LLP

Subject to Hyderabad Jurisdiction



Authorised signatory

# Purchase Order

Page(s) 1 Of 1

03-01-2023 16:01:22



95718

27.12.22 3:31:52

py

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

| Supplier Details                                 |            |            |        |
|--------------------------------------------------|------------|------------|--------|
| Summit Sales LLP-GVDC                            | Doc No     | 95718      | 206619 |
| 5-4-187/3&4, II nd Floor, MG Road, Secunderabad. | Doc Date   | 03-01-2023 |        |
| GSTIN 36AAHCG4940K1ZC                            | Quote No   | nil        |        |
| 040-66335551                                     | Quote Date | 19-12-2022 |        |
| 040-66335551                                     | SupplyType | Supply     |        |

**Kind Attn : Meghana**

Purchase Order for the Supply of following Items.

| Item Name                                                                                                | Qty    | Rate     | Dis% | GST   | Amount            |
|----------------------------------------------------------------------------------------------------------|--------|----------|------|-------|-------------------|
| 1 404600 - TLFL-Tiles - Floor Tiles-Vitified-Inspira-Prolith grigio chiar - 600X600MM - sqm<br>163-boxes | 235.00 | 1,020.00 | 0.00 | 18.00 | 282,846.00        |
| 2 858500 - TLFL-Tiles - Floor Tiles-Vitified-Inspira-Prolith grigio GVT - 600X600MM - sqm<br>50-boxes    | 73.00  | 1,020.00 | 0.00 | 18.00 | 87,862.80         |
| Total Order Value . . .                                                                                  |        |          |      |       | <b>370,708.80</b> |
| Rupees : Three Lakh(s) Seventy Thousand Seven Hundred Eight and Paise Eighty Only.                       |        |          |      |       |                   |

**Terms and Conditions :-**

|                   |                                                                                                                                                                                                                                                |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Specification /   | All items shall be of Nitco & Inspira brand/company                                                                                                                                                                                            |
| Payment Terms     | After Delivery & Production of bill                                                                                                                                                                                                            |
| Tax               | All taxes included in above price.                                                                                                                                                                                                             |
| Delivery Date     | Next Day.                                                                                                                                                                                                                                      |
| Delivery Location | Innapolis<br>Sy no-542, Genome Valley, Thurkapally, Hyderabad, Telangana<br>Phone. Nagamani(Engineer) - 7981951035                                                                                                                             |
| Penalty For Delay | Nil                                                                                                                                                                                                                                            |
| Transportation    | Nil                                                                                                                                                                                                                                            |
| Warranty          | Nil                                                                                                                                                                                                                                            |
| Advance Paid      | Nil                                                                                                                                                                                                                                            |
| Other Terms       | We reserve the right to reject items not conforming to quality and specifications.Above order for 4545 ground floor east,west side toilets wall tiles and flooring purpose.                                                                    |
| Completion Date   | NA                                                                                                                                                                                                                                             |
| 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 invoice must be sent to HO office or purchase site office, proof of delivery/DC can be sent by email. |

**For MDs APPROVAL**

- ☐ High Value/quantity beyond limits.
- ☒ Po/Req. processed-post approval.
- ☐ Approval for technical details/clarification.
- ☐ Replenishing SLLP stock
- ☐ Other

For **G V Reserch Centers Pvt Ltd**

Authorised Signatory

Name :

04/01/2023

Name :

Accepted the above Terms And Conditions

For **Summit Sales LLP-GVDC**

Date : \_/\_/\_

| Requisition Form               |                                                                                   |                 |                       |           |           |             |  |
|--------------------------------|-----------------------------------------------------------------------------------|-----------------|-----------------------|-----------|-----------|-------------|--|
| Company Name:                  | GVRC                                                                              | Date:           | 02.01.2023            |           |           |             |  |
| Site & Phase:                  | Innapolis                                                                         | Time:           | 12:00                 |           |           |             |  |
| Unit No./Block No.             |                                                                                   |                 |                       |           |           |             |  |
| Supplier:                      |                                                                                   | Req. No.        | 206619                |           |           |             |  |
| Material required before date: | URGENT                                                                            | ID No.          | 83010                 |           |           |             |  |
| S No                           | Item                                                                              | Qty required    | Qty available at site | Order Qty | Inward No | Inward Date |  |
| 1                              | TILE2942-Tiles-Floor Tiles-Vitified-Inspira Proliith grigio chiaro-600X600mm-Sqm  | 235             | 0                     | 235       |           |             |  |
| 2                              | TILE7825-Tiles-Floor Tiles-Vitified-Inspira Proliith grigio GVT-600X600mm-Sqm     | 73              | 0                     | 73        |           |             |  |
| 3                              |                                                                                   |                 |                       |           |           |             |  |
| 4                              |                                                                                   |                 |                       |           |           |             |  |
| 5                              |                                                                                   |                 |                       |           |           |             |  |
| 6                              |                                                                                   |                 |                       |           |           |             |  |
| 7                              |                                                                                   |                 |                       |           |           |             |  |
| 8                              |                                                                                   |                 |                       |           |           |             |  |
| 9                              |                                                                                   |                 |                       |           |           |             |  |
| 10                             |                                                                                   |                 |                       |           |           |             |  |
| Remarks:                       | Towards 4545 ground floor east, west side toilets wall tiles and flooring purpose |                 |                       |           |           |             |  |
|                                | Engineer                                                                          | Project Manager | APPROVED              |           | Purchase  | MD          |  |
| Prepared By:                   | Mr. Madhu                                                                         |                 |                       |           |           |             |  |
| Approved By:                   | Mr. Madhu                                                                         |                 |                       |           |           |             |  |
| Sign & Date:                   | 02.01.2023                                                                        |                 |                       |           |           |             |  |

00665718 [5 cells]

7/01/23

04 JAN 2023

MANAGER PROCUREMENT

DELIVERY CHALLAN

Summit Sales LLP

#S-4-18703 & 4, II Floor, Saham Mansion, M G Road, Secunderabad - 500003

Email: purchase@mxdlproperties.com

TRANSIT COPY

Supplier - Customer - Transporter - Copy

GSTIN/JUNE: 36ACQFS2044C1Z7

1 of 1 - 09-01-2023

Customer Details

GV Research center Pvt Ltd

Sr No 342, Ganga valley, Thirupathi, Hyderabad

GSTIN: 36AAHCG4562D1ZP

DC No 23984

DC Date 09-01-2023

PO No 95718

PO Date 03-01-2023

Req ID 83070

Req Date 02-01-2023

Loc Req No 206619

Description of Goods

HSN/SAC

Qty

1 404000 - TLFL-Tiles - Floor Tiles-Verified-Inspira-Prolith grigio chiaro - 600X600MM - sqm

69071090

235

2 858500 - TLFL-Tiles - Floor Tiles-Verified-Inspira-Prolith grigio GVT - 600X600MM - sqm

69071090

73

OUTWARD

Outward No: 1051 5/1/23

TRN No: 1051

Received By: Rajan

S S LLP-GVDC

Subject to Hyderabad Jurisdiction

INWARD

Inward No: 11015 D: 10/01/23

TRN No: 116053 D: 09/01/23

Received By: [Signature]

Genome Valley Resco Ltd.

