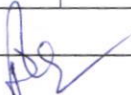


## Form for closure of purchase order

|                                                                                                                                                                                                                                     |                                                                                              |                                                                                               |                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| PO no.: 93711                                                                                                                                                                                                                       | PO date: 7/11/22                                                                             | Req. no.: 208201                                                                              | Advice Scan ID                                                                  |
| Barcoded PO available <input checked="" type="checkbox"/> Y/ <input type="checkbox"/> N                                                                                                                                             | Invoice original available <input checked="" type="checkbox"/> Y/ <input type="checkbox"/> N | Copy available <input checked="" type="checkbox"/> Y/ <input type="checkbox"/> N              | POD available <input checked="" type="checkbox"/> Y/ <input type="checkbox"/> N |
| Data required from site/engineers:                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| MRN nos. related to PO                                                                                                                                                                                                              |                                                                                              |                                                                                               |                                                                                 |
| <input type="checkbox"/> Part material received.                                                                                                                                                                                    |                                                                                              | <input type="checkbox"/> Full material received.                                              |                                                                                 |
| <input type="checkbox"/> Close PO – Balance material will be re-ordered by new requisition.                                                                                                                                         |                                                                                              | <input checked="" type="checkbox"/> Material not received.                                    |                                                                                 |
| <input type="checkbox"/> Cancel PO. Material not required.                                                                                                                                                                          |                                                                                              | <input checked="" type="checkbox"/> Cancel PO. Material will be re-ordered by new requisition |                                                                                 |
| <input type="checkbox"/> Keep PO open. Material required.                                                                                                                                                                           |                                                                                              | <input type="checkbox"/> Keep PO open. Work under progress.                                   |                                                                                 |
| Remarks by engineer: material not received. close this PO                                                                                                                                                                           |                                                                                              |                                                                                               |                                                                                 |
| Notes: 1. Provide details of material received by way of separate attachment. 2. Provide scanned copy of DCs/proof of delivery + PO. 3. Provide copies of invoices if available. 4. This entire set to be scanned and sent to Ravi. |                                                                                              |                                                                                               |                                                                                 |
| Prepared by: Basaveshwar                                                                                                                                                                                                            | Sign:       | Date: 10/03/23                                                                                |                                                                                 |
| Data required from accounts:                                                                                                                                                                                                        |                                                                                              |                                                                                               |                                                                                 |
| <input type="checkbox"/> Checked with E&D for receipt of bills.                                                                                                                                                                     |                                                                                              |                                                                                               |                                                                                 |
| <input checked="" type="checkbox"/> Bills not received against this PO.                                                                                                                                                             |                                                                                              | <input type="checkbox"/> Part bill received against this PO.                                  |                                                                                 |
| <input type="checkbox"/> Advance paid against this PO                                                                                                                                                                               |                                                                                              | <input type="checkbox"/> All bills received against this PO.                                  |                                                                                 |
| Amount paid:                                                                                                                                                                                                                        |                                                                                              | Date of payment:                                                                              |                                                                                 |
| Details of part bill received:                                                                                                                                                                                                      |                                                                                              |                                                                                               |                                                                                 |
| Sl. No.                                                                                                                                                                                                                             | Bill no.                                                                                     | Bill date                                                                                     | Bill amount                                                                     |
| 1.                                                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| 2.                                                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| 3.                                                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| Remarks by Accountants:                                                                                                                                                                                                             |                                                                                              |                                                                                               |                                                                                 |
| Prepared by: Rajyalakshmi                                                                                                                                                                                                           | Sign:     | Date: 14/03/23                                                                                |                                                                                 |
| Notes: 1. POs/WOs issued for turnkey works - may have been processed by E&D. Check before filling the above.                                                                                                                        |                                                                                              |                                                                                               |                                                                                 |
| Prepared by:                                                                                                                                                                                                                        | Sign:                                                                                        | Date:                                                                                         |                                                                                 |
| Remarks by Ravi + details of bills to be approved:                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| Sl. No.                                                                                                                                                                                                                             | Bill no.                                                                                     | Bill date                                                                                     | Bill amount                                                                     |
| 1.                                                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| 2.                                                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| 3.                                                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| Remarks: close / cancel this PO                                                                                                                                                                                                     |                                                                                              |                                                                                               |                                                                                 |
| Prepared by: Ravi                                                                                                                                                                                                                   | Sign:     | Date: 15/03/23                                                                                |                                                                                 |
| Advice by MD - action to be taken.                                                                                                                                                                                                  |                                                                                              |                                                                                               |                                                                                 |
| <input type="checkbox"/> Get certified bill from supplier (not original).                                                                                                                                                           |                                                                                              | <input type="checkbox"/> Prepare bill in SSLP for material supplied.                          |                                                                                 |
| <input type="checkbox"/> Thereafter, prepare advice for credit to supplier and send to Soham for processing.                                                                                                                        |                                                                                              |                                                                                               |                                                                                 |
| <input checked="" type="checkbox"/> Close PO                                                                                                                                                                                        |                                                                                              | <input type="checkbox"/> Keep PO open. Material awaited                                       |                                                                                 |
| <input type="checkbox"/> Accounts to be reconciled with supplier. Get supplier's ledger.                                                                                                                                            |                                                                                              |                                                                                               |                                                                                 |
| Remarks:                                                                                                                                                                                                                            |                                                                                              |                                                                                               |                                                                                 |
| Approved by: Soham                                                                                                                                                                                                                  | Sign:                                                                                        | Date:    |                                                                                 |

APPROVED BY  
15 MAR 2023  
SOHAM MODI  
MANAGING DIRECTOR

# Purchase Order



93711

01.11.22 2:54:36

copy

Page(s) 1 Of 1

11-11-2022 10:53:57

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

**Supplier Details**

Dilpreet Tubes  
Near Lala Temple, Ranigunj, Secunderabad-500003

**GSTIN** -

9885051915

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 93711      | 208201 |
| <b>Doc Date</b>   | 07-11-2022 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 06-11-2022 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Mr.Hari Mehta**

Purchase Order for the Supply of following Items.

| Item Name                                                                                         | Qty    | Rate  | Dis% | IGST  | Amount           |
|---------------------------------------------------------------------------------------------------|--------|-------|------|-------|------------------|
| 1 631900 - STEL-Steel - MS L Angle - 6mL-- -<br>100X100X8mm - kgs<br>72 kg's per length- 4 length | 288.00 | 65.00 | 0.00 | 18.00 | 22,089.60        |
| <b>Total Order Value . . .</b>                                                                    |        |       |      |       | <b>22,089.60</b> |
| Rupees : Twenty Two Thousand Eighty Nine and Paise Sixty Only.                                    |        |       |      |       |                  |

**Terms and Conditions :-**

|                              |                                                                                                                                                                                                                                                  |
|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Specification / Brand</b> | As per details given in the quotation.                                                                                                                                                                                                           |
| <b>Payment Terms</b>         | After Delivery & Production of bill                                                                                                                                                                                                              |
| <b>Tax</b>                   | Inclusive of all taxes                                                                                                                                                                                                                           |
| <b>Delivery Date</b>         | Next day.                                                                                                                                                                                                                                        |
| <b>Delivery Location</b>     | Gulmohar Residency<br>Survey No 19, Mallapur, Hyderabad. NExt to NFC Railway Over Bridge<br>Phone. Contact: Security _____, 8309938133                                                                                                           |
| <b>Penalty For Delay</b>     | Nil                                                                                                                                                                                                                                              |
| <b>Transportation Cost</b>   | Extra.                                                                                                                                                                                                                                           |
| <b>Warranty</b>              | Nil                                                                                                                                                                                                                                              |
| <b>Advance Paid</b>          | Nil                                                                                                                                                                                                                                              |
| <b>Other Terms</b>           | We reserve the right to reject items not conforming to quality and specifications. Final payment as per actual weighment. Above order for H-block flat no 201,202,203,204 Door frame fixing work purpose.                                        |
| <b>Completion Date</b>       | Nil                                                                                                                                                                                                                                              |
| <b>Measurment</b>            | Nil                                                                                                                                                                                                                                              |
| <b>Security</b>              | Nil                                                                                                                                                                                                                                              |
| <b>Remarks</b>               | 'Original invoice + copy of proof of delivery is required to process invoice for payment. DO NOT send original invoice to site. Original invoices must be sent to HO office or purchase site office. Proof of delivery/DC can be sent by email.' |

For **Modi Reality Mallapur LLP**

Authorised Signatory

Accepted the above Terms And Conditions

For **Dilpreet Tubes**

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

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

Contact

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

|                                |                                                   |                                                                        |                       |              |                       |
|--------------------------------|---------------------------------------------------|------------------------------------------------------------------------|-----------------------|--------------|-----------------------|
| Company Name:                  |                                                   | MRMLP                                                                  |                       | Date:        | 06-11-2022            |
| Site & Phase:                  |                                                   | Gulmohar Residency                                                     |                       | Time:        |                       |
| Unit No./Block No              |                                                   | H-Block Flat no-201 to 204                                             |                       | Req. No.     | 208201                |
| Supplier:                      |                                                   |                                                                        |                       | ID No        | 81238                 |
| Material required before date: |                                                   | urgent                                                                 |                       | Qty required | Qty available at site |
| S No                           | Item                                              | Qty required                                                           | Qty available at site | Order Qty    | Inward No             |
| 1                              | HARD1307-Hardware-SS Screws -CSK Head-6x32MM-Pkts | 10                                                                     | 0                     | 10           |                       |
| 2                              | HARD1916-Hardware-SS Screws -CSK Head-6x50MM-Pkts | 10                                                                     | 0                     | 10           |                       |
| 3                              | STEL6319-Steel-MS L Angle - 6mL-100X100X8mm-lgs   | 4                                                                      | 0                     | 4            |                       |
| 4                              | CHEM4746-Chemical-Araldite-450gms-Nos             | 10                                                                     | 0                     | 10           |                       |
| 5                              |                                                   |                                                                        |                       |              |                       |
| 6                              |                                                   |                                                                        |                       |              |                       |
| 7                              |                                                   |                                                                        |                       |              |                       |
| 8                              |                                                   |                                                                        |                       |              |                       |
| 9                              |                                                   |                                                                        |                       |              |                       |
| 10                             |                                                   |                                                                        |                       |              |                       |
| Remarks:                       |                                                   | Towards H-Block Flat no-201,202,203,204 Door frame fixing work purpose |                       |              |                       |
| Engineer                       |                                                   | Project Manager                                                        |                       | Purchase     | MD                    |
| Prepared By:                   |                                                   | G. Bhagath                                                             |                       |              |                       |
| Approved By:                   |                                                   |                                                                        |                       |              |                       |
| Sign & Date:                   |                                                   |                                                                        |                       |              |                       |

P.O. No. 93680

06-11-2022