

## Form for closure of purchase order

|                                                                                                                                                                                                                                     |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------------------|---------------|-------------------------------------------------------------------|--|
| PO no.:                                                                                                                                                                                                                             | 92240                                                             | PO date:                                                                                      | 23/09/22                                                          | Req. no.:                                                            | 193896        | 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 | <input type="checkbox"/> Copy available                              | 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 checked="" 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 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: K. Sureshwar                                                                                                                                                                                                           |                                                                   | 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"/> All bills received against this PO.         |               |                                                                   |  |
| <input type="checkbox"/> Advance paid against this PO                                                                                                                                                                               |                                                                   | Amount paid:                                                                                  |                                                                   | Date of payment:                                                     |               |                                                                   |  |
| Details of part bill received:                                                                                                                                                                                                      |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| Sl. No.                                                                                                                                                                                                                             | Bill no.                                                          | Bill date                                                                                     | Bill amount                                                       | Cr. given to supplier                                                |               |                                                                   |  |
| 1.                                                                                                                                                                                                                                  |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| 2.                                                                                                                                                                                                                                  |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| 3.                                                                                                                                                                                                                                  |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| Remarks by Accountants:                                                                                                                                                                                                             |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| Prepared by: Rajalakshmi                                                                                                                                                                                                            |                                                                   | 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                                                       | MRN no.                                                              |               |                                                                   |  |
| 1.                                                                                                                                                                                                                                  |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| 2.                                                                                                                                                                                                                                  |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| 3.                                                                                                                                                                                                                                  |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| Remarks: cancel this p.o.                                                                                                                                                                                                           |                                                                   |                                                                                               |                                                                   |                                                                      |               |                                                                   |  |
| 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**  
16 MAR 2023  
SOHAM MODI  
MANAGING DIRECTOR

# Purchase Order

Page(s) 1 Of 1

24-09-2022 11:27:40

Ori

From Company : **Modi Reality Mallapur LLP**

5-4-187/3&amp;3, II nd floor, Soham Mansion, MG Road, Secunderabad.

G S T No. : 36AAEFM1459R1ZP

| Supplier Details                                                                                                                                                                             |                   |            |        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------|--------|
| Ganji Venkannah & sons (Asian Paints)<br>#5-5-97/2, Ganji chambers, Ranigunj, Secunderabad-500003 A.P.India.<br><br><b>GSTIN</b> 36AABFG9288K1ZT 040-40146505<br>27710339,27719935,277807357 | <b>Doc No</b>     | 92240      | 193896 |
|                                                                                                                                                                                              | <b>Doc Date</b>   | 23-09-2022 |        |
|                                                                                                                                                                                              | <b>Quote No</b>   | Nil        |        |
|                                                                                                                                                                                              | <b>Quote Date</b> | 22-09-2022 |        |
|                                                                                                                                                                                              | <b>SupplyType</b> | Supply     |        |

**Kind Attn : Mr.Ganji Ashok**

Purchase Order for the Supply of following Items.

| Item Name                                                                        | Qty   | Rate   | Dis% | GST   | Amount           |
|----------------------------------------------------------------------------------|-------|--------|------|-------|------------------|
| 1 854800 - PARO-Paints - Red Oxide Primer-- Asian - 1Ltr - can                   | 8.00  | 216.10 | 0.00 | 18.00 | 2,039.98         |
| 2 845600 - PATO-Paints - Turpentine oil-- - 1 ltr can - Nos                      | 20.00 | 114.40 | 0.00 | 18.00 | 2,699.84         |
| 3 417700 - PAEN-Paints - Enamel-Blue color- - 4Ltrs - Can                        | 15.00 | 936.40 | 0.00 | 18.00 | 16,574.28        |
| 4 539500 - PAEN-Paints - Enamel-Black -Asian Apcolite - 4Ltrs - can              | 9.00  | 936.40 | 0.00 | 18.00 | 9,944.57         |
| <b>Total Order Value . . .</b>                                                   |       |        |      |       | <b>31,258.67</b> |
| Rupees : Thirty One Thousand Two Hundred Fifty Eight and Paise Sixty Seven 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>                   | All taxes included in above price.                                                                                                                                                                                                             |
| <b>Delivery Date</b>         | Next Working Day.                                                                                                                                                                                                                              |
| <b>Delivery Location</b>     | Gulmohar Residency<br>Survey No 19, Mallapur, Hyderabad. NExt to NFC Railway Over Bridge<br>Phone. Contact: Security _____, Admin 9502211011                                                                                                   |
| <b>Penalty For Delay</b>     | Nil                                                                                                                                                                                                                                            |
| <b>Transportation Cost</b>   | Transport cost shall be borne by us.                                                                                                                                                                                                           |
| <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.Above order for rain water pipe line and scaffolding painting work purpose.                                                                                  |
| <b>Completion Date</b>       | NA                                                                                                                                                                                                                                             |
| <b>Measurment</b>            | NA                                                                                                                                                                                                                                             |
| <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

Name :  
Contact

Accepted the above Terms And Conditions

For **Ganji Venkannah & sons (Asian Paints)**

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

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



| Requisition Form               |                                                       | Date:                                                              |                       | 22-09-2022      |           |
|--------------------------------|-------------------------------------------------------|--------------------------------------------------------------------|-----------------------|-----------------|-----------|
| Company Name:                  |                                                       | MRMLLP                                                             |                       | Time:           |           |
| Site & Phase :                 |                                                       | GMR                                                                |                       | 14:22           |           |
| Unit No./Block No.             |                                                       |                                                                    |                       |                 |           |
| Supplier:                      |                                                       |                                                                    |                       | Req. No.        |           |
| Material required before date: |                                                       | URGENT                                                             |                       | 193896          |           |
|                                |                                                       | ID No.                                                             |                       | 79972           |           |
| S No                           | Item                                                  | Qty required                                                       | Qty available at site | Order Qty       | Inward No |
| 1                              | PARO8548-Paints-Red Oxide Primer--Asian-1Ltr-can      | 8                                                                  | 0                     | 8               |           |
| 2                              | PATO8456-Paints-Turpentine oil--1 ltr can-Nos         | 20                                                                 | 0                     | 20              |           |
| 3                              | PAEN4177-Paints-Enamel-Blue color--4Ltrs-Can          | 15                                                                 | 0                     | 15              |           |
| 4                              | PAEN5395-Paints-Enamel-Black-Asian Apcolite-4Ltrs-can | 9                                                                  | 0                     | 9               |           |
| 5                              |                                                       |                                                                    |                       |                 |           |
| 6                              |                                                       |                                                                    |                       |                 |           |
| 7                              |                                                       |                                                                    |                       |                 |           |
| 8                              |                                                       |                                                                    |                       |                 |           |
| 9                              |                                                       |                                                                    |                       |                 |           |
| 10                             |                                                       |                                                                    |                       |                 |           |
| Remarks:                       |                                                       | for rain water pipe line and scaffolding painting work at gmr site |                       |                 |           |
| Prepared By:                   |                                                       | Engineer                                                           |                       | Project Manager |           |
| Approved By:                   |                                                       | Sultan ali                                                         |                       | Purchase        |           |
| Sign & Date:                   |                                                       |                                                                    |                       |                 |           |

92240

955+  
135  
1105  
1105

APPROVED

24 SEP 2022

P. PRABHAKAR  
S. MANAGER PURC

APPROVED BY

21 SEP 2022

M. RAM PRASAD (G.M.T.)  
Project Manager

91242