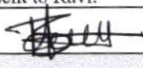


## Form for closure of purchase order

|                                                                                                                                                                                                                                     |                                                                                                                             |                                                                         |                                                                      |                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------|
| PO no.: <b>94591</b>                                                                                                                                                                                                                | PO date: <b>2/12/22</b>                                                                                                     | Req. no.: <b>208401</b>                                                 | Advice Scan ID                                                       |                       |
| Barcoded PO available <input type="checkbox"/> Y/ <input type="checkbox"/> N                                                                                                                                                        | Invoice original available <input type="checkbox"/> Y/ <input type="checkbox"/> N / <input type="checkbox"/> Copy available | POD available <input type="checkbox"/> Y/ <input type="checkbox"/> N    |                                                                      |                       |
| Data required from site/engineers:                                                                                                                                                                                                  |                                                                                                                             |                                                                         |                                                                      |                       |
| MRN nos. related to PO                                                                                                                                                                                                              | <b>11A701</b>                                                                                                               |                                                                         |                                                                      |                       |
| <input type="checkbox"/> Part material received.                                                                                                                                                                                    | <input checked="" type="checkbox"/> Full material received.                                                                 | <input type="checkbox"/> Material not received.                         |                                                                      |                       |
| <input type="checkbox"/> Close PO – Balance material will be re-ordered by new requisition.                                                                                                                                         |                                                                                                                             |                                                                         |                                                                      |                       |
| <input type="checkbox"/> Cancel PO. Material not required.                                                                                                                                                                          | <input type="checkbox"/> Cancel PO. Material will be re-ordered by new requisition                                          |                                                                         |                                                                      |                       |
| <input type="checkbox"/> Keep PO open. Material required.                                                                                                                                                                           | <input type="checkbox"/> Keep PO open. Work under progress.                                                                 |                                                                         |                                                                      |                       |
| Remarks by engineer: <b>Total material received. close this PO.</b>                                                                                                                                                                 |                                                                                                                             |                                                                         |                                                                      |                       |
| 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: <b>Basaveshwari</b>                                                                                                                                                                                                    | Sign:                                      | Date: <b>20/03/23</b>                                                   |                                                                      |                       |
| Data required from accounts:                                                                                                                                                                                                        |                                                                                                                             |                                                                         |                                                                      |                       |
| <input type="checkbox"/>                                                                                                                                                                                                            | Checked with E&D for receipt of bills.                                                                                      |                                                                         |                                                                      |                       |
| <input type="checkbox"/> Bills not received against this PO.                                                                                                                                                                        | <input type="checkbox"/> Part bill received against this PO.                                                                | <input checked="" 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.                                                                                                                                                                                                                                  | <b>498</b>                                                                                                                  | <b>3.12.22</b>                                                          | <b>10,030</b>                                                        | <b>Yes</b>            |
| 2.                                                                                                                                                                                                                                  |                                                                                                                             |                                                                         |                                                                      |                       |
| 3.                                                                                                                                                                                                                                  |                                                                                                                             |                                                                         |                                                                      |                       |
| Remarks by Accountants:                                                                                                                                                                                                             |                                                                                                                             |                                                                         |                                                                      |                       |
| Prepared by: <b>Rajyalamb</b>                                                                                                                                                                                                       | Sign:                                    | Date: <b>u/u/23</b>                                                     |                                                                      |                       |
| 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: <b>All bill received against this PO.</b>                                                                                                                                                                                  |                                                                                                                             |                                                                         |                                                                      |                       |
| Prepared by: Ravi                                                                                                                                                                                                                   | Sign:                                    | Date: <b>05/04/23.</b>                                                  |                                                                      |                       |
| Advice by MD - action to be taken.                                                                                                                                                                                                  |                                                                                                                             |                                                                         |                                                                      |                       |
| <input type="checkbox"/>                                                                                                                                                                                                            | Get certified bill from supplier (not original).                                                                            |                                                                         | <input type="checkbox"/> Prepare bill in SLLP for material supplied. |                       |
| <input checked="" 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**  
**- 6 APR 2023**  
**SOHAM MODI**  
**MANAGING DIRECTOR**

## Purchase Order

Page(s) 1 Of 1

02-12-2022 16:10:36



94591

29.11.22 5:41:43

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

### Supplier Details

Mr. Yousuf Ali  
#2-2-50/A/1, Rahat Nagar, Amberpet, Hyderabad - 500013

GSTIN 36AFBPY8773N1ZE

9885864330

|            |            |        |
|------------|------------|--------|
| Doc No     | 94591      | 208401 |
| Doc Date   | 02-12-2022 |        |
| Quote No   | Nil        |        |
| Quote Date | 02-12-2022 |        |
| SupplyType | Supply     |        |

**Kind Attn : Mr. Yousuf Ali**

Purchase Order for the Supply of following Items.

| Item Name                                                 | Qty    | Rate  | Dis% | GST   | Amount   |
|-----------------------------------------------------------|--------|-------|------|-------|----------|
| 1 429200 - HARD-Hardware - PVC-U Profile- - L3050mm - Rft | 800.00 | 10.00 | 0.00 | 18.00 | 9,440.00 |
| Total Order Value . . .                                   |        |       |      |       | 9,440.00 |

Rupees : Nine Thousand Four Hundred Forty Only.

### Terms and Conditions :-

**Specification / Brand** As per details given in the quotation.**Payment Terms** 100% Advance**Tax** All taxes included in above price.**Delivery Date** Next Day.

**Delivery Location** Gulmohar Residency  
Survey No 19, Mallapur, Hyderabad. NExt to NFC Railway Over Bridge  
Phone. Contact: Security \_\_\_\_\_, 8309938133

**Penalty For Delay** Nil**Transportation Cost** Extra**Warranty** Nil**Advance Paid** 9440/-by RTGS/NEFT**Other Terms** We reserve the right to reject items not conforming quality and specifications.Above order for G-Block Bathroom ceiling work 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 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 **Mr. Yousuf Ali**

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

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

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

|                                |                                            |                                                       |                 |                       |           |           |             |  |
|--------------------------------|--------------------------------------------|-------------------------------------------------------|-----------------|-----------------------|-----------|-----------|-------------|--|
| Requisition Form               |                                            |                                                       |                 |                       |           |           |             |  |
| Company Name:                  |                                            | MRM LLP                                               | Date:           | 01.12.2022            |           |           |             |  |
| Site & Phase :                 |                                            | GMR                                                   | Time:           | 11:00                 |           |           |             |  |
| Unit No./Block No.             |                                            | G-Block                                               |                 |                       |           |           |             |  |
| Supplier:                      |                                            | Yousuf Ali                                            | Req. No.        | 208401                |           |           |             |  |
| Material required before date: |                                            | 4.12.22                                               | ID No.          | 82054                 |           |           |             |  |
| S No                           | Item                                       |                                                       | Qty required    | Qty available at site | Order Qty | Inward No | Inward Date |  |
| 1                              | HARD4292-Hardware-PVC-U Profile-13050MM-R# | 28 flats                                              | 800             | 0                     | 800       |           |             |  |
| 2                              |                                            |                                                       |                 |                       |           |           |             |  |
| 3                              |                                            |                                                       |                 |                       |           |           |             |  |
| 4                              |                                            |                                                       |                 |                       |           |           |             |  |
| 5                              |                                            |                                                       |                 |                       |           |           |             |  |
| 6                              |                                            |                                                       |                 |                       |           |           |             |  |
| 7                              |                                            |                                                       |                 |                       |           |           |             |  |
| 8                              |                                            |                                                       |                 |                       |           |           |             |  |
| 9                              |                                            |                                                       |                 |                       |           |           |             |  |
| 10                             |                                            |                                                       |                 |                       |           |           |             |  |
| Remarks:                       |                                            | Towards G block bathrooms false ceiling work purpose. |                 |                       |           |           |             |  |
|                                |                                            |                                                       |                 |                       |           |           |             |  |
|                                |                                            |                                                       |                 |                       |           |           |             |  |
| Prepared By:                   |                                            | Engineer                                              | Project Manager |                       |           |           |             |  |
|                                |                                            | Nagerdar                                              | Ram Prasad      |                       |           |           |             |  |
| Approved By:                   |                                            |                                                       |                 |                       |           |           |             |  |
| Sign & Date:                   |                                            | 01.12.22                                              |                 |                       |           |           |             |  |

**APPROVED**  
**02 DEC 2022**  
**P. VENKATESHWARLU**  
**MANAGER PURCHASE**

MD

# Purchase Order

Page(s) 1 Of 1

21-02-2023 15:10:36

Original / Office Copy / Purchase Div.Copy

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

**Supplier Details**

Mr. Yousuf Ali  
#2-2-50/A/1, Rahat Nagar, Amberpet, Hyderabad - 500013

**GSTIN** 36AFBPY8773N1ZE

9885864330

|                   |            |        |
|-------------------|------------|--------|
| <b>Doc No</b>     | 94591      | 208401 |
| <b>Doc Date</b>   | 02-12-2022 |        |
| <b>Quote No</b>   | Nil        |        |
| <b>Quote Date</b> | 02-12-2022 |        |
| <b>SupplyType</b> | Supply     |        |

**Kind Attn : Mr. Yousuf Ali**

Purchase Order for the Supply of following Items.

| Item Name                                                 | Qty    | Rate  | Dis% | GST   | Amount          |
|-----------------------------------------------------------|--------|-------|------|-------|-----------------|
| 1 429200 - HARD-Hardware - PVC-U Profile- - L3050mm - Rft | 800.00 | 10.00 | 0.00 | 18.00 | 9,440.00        |
| <b>Total Order Value . . .</b>                            |        |       |      |       | <b>9,440.00</b> |

Rupees : Nine Thousand Four Hundred Fourty Only.

**Terms and Conditions :-**

|                              |                                                                                                                                                                                                                                                  |
|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Specification / Brand</b> | As per details given in the quotation.                                                                                                                                                                                                           |
| <b>Payment Terms</b>         | 100% Advance                                                                                                                                                                                                                                     |
| <b>Tax</b>                   | All taxes included in above price.                                                                                                                                                                                                               |
| <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>          | 9440/-by RTGS/NEFT                                                                                                                                                                                                                               |
| <b>Other Terms</b>           | We reserve the right to reject items not conforming quality and specifications.Above order for G-Block Bathroom ceiling work purpose.                                                                                                            |
| <b>Completion Date</b>       | NA                                                                                                                                                                                                                                               |
| <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 **Mr. Yousuf Ali**

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

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

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

GSTIN : 36AFBPY 8773N1ZE

DELIVERY CHALLAN

**YOUSUF ALI**  
**INTERIORS**

Cell...

**PVC PANNELS AND GI CHANNELS GYPSUM BOARD SUPPLIERS****SPL.IN GYPSUM FALSE CEILING, GYPSUM PARTITION, PVC CEILING,  
& ETC. ALL TYPES OF FALSE CEILING WORKS IS DONE**

# 2-2-50/A/1, Rahath Nagar, Amberpet, Hyderabad, Telangana-13.

M/s. MODI Realty Mallapur  
Address: L.P. MallapurD.C. No. 013 Date: 3/12/2022P.O. No. 94591 Date: \_\_\_\_\_Phone: GMR.GSTIN: 36AFBPY 1459K1ZPVehicle No. TS. 11. VC. 9888

| S.No.                                                                                                                                           | PARTICULARS                   | Quantity | Rate | Amount |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------|------|--------|
| 1                                                                                                                                               | PVC PATE 'U' - RT<br>(80 NOS) | 800 RT   |      |        |
| INWARD<br>MODI REALTY MALLAPUR LLP<br>Ward No 10193 DL 03/12/22<br>RN No 116101 DL 06/12/22<br>Received By <u>G. V. S.</u> Sign <u>03/12/22</u> |                               |          |      |        |
| Total                                                                                                                                           |                               |          |      |        |

Rupees in words :

No Return  
No Exchange

For YOUSUF ALI

Authorized Signatory