

**PURCHASE DIVISION**  
Advise for approval for credit to supplier

|                                                                                                                                                                                                                                        |                  |                                                                                                                                                      |             |                                                          |                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------|------------------|
| Date: 4/8/23                                                                                                                                                                                                                           |                  | Prepared by: [Signature]                                                                                                                             |             | Serial no.                                               |                  |
| Supplier name: Veyker MEDIA                                                                                                                                                                                                            |                  |                                                                                                                                                      |             | HO inward no.                                            |                  |
| Firm/Company: NAD: Health Project                                                                                                                                                                                                      |                  | Project: Genome Valley                                                                                                                               |             | HO received date                                         |                  |
| PO/WO date: 2/8/23                                                                                                                                                                                                                     |                  | PO/WO No.: 2005                                                                                                                                      |             | Scan ID.                                                 |                  |
| Sl no.                                                                                                                                                                                                                                 | Bill no.         | Bill date                                                                                                                                            | Bill amount | Original attached                                        |                  |
| 1                                                                                                                                                                                                                                      | 196              | 31/7/23                                                                                                                                              | 28931       | <input type="checkbox"/> Yes <input type="checkbox"/> No |                  |
| 2                                                                                                                                                                                                                                      |                  |                                                                                                                                                      |             | <input type="checkbox"/> Yes <input type="checkbox"/> No |                  |
| 3                                                                                                                                                                                                                                      |                  |                                                                                                                                                      |             | <input type="checkbox"/> Yes <input type="checkbox"/> No |                  |
| 4                                                                                                                                                                                                                                      |                  |                                                                                                                                                      |             | <input type="checkbox"/> Yes <input type="checkbox"/> No |                  |
| Amount A - Bills total (Excluding Transport & Hamali Charges):                                                                                                                                                                         |                  |                                                                                                                                                      |             |                                                          |                  |
| Proof of delivery by way of: <input type="checkbox"/> DCR bill <input type="checkbox"/> Steel report <input type="checkbox"/> RMC pour report <input type="checkbox"/> Solid block report <input type="checkbox"/> Installation report |                  |                                                                                                                                                      |             |                                                          |                  |
| MEN nos.: 20230804008                                                                                                                                                                                                                  |                  | Proof of delivery matches MNR                                                                                                                        |             | <input type="checkbox"/> Yes <input type="checkbox"/> No |                  |
| Amount B - Other Credits : Transportation charges                                                                                                                                                                                      |                  |                                                                                                                                                      |             |                                                          |                  |
| Amount C - Other Debits :                                                                                                                                                                                                              |                  |                                                                                                                                                      |             |                                                          |                  |
| Amount D (D=A+B-C) - Amount to be credited to the supplier:                                                                                                                                                                            |                  |                                                                                                                                                      |             | 28931                                                    |                  |
| Amount E - PO / WO value:                                                                                                                                                                                                              |                  |                                                                                                                                                      |             | 28931                                                    |                  |
| Amount F - Difference (A - E):                                                                                                                                                                                                         |                  |                                                                                                                                                      |             |                                                          |                  |
| Quantity received as per PO/WO                                                                                                                                                                                                         |                  | <input type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Part received |             |                                                          |                  |
| Close PO / WO                                                                                                                                                                                                                          |                  | <input type="checkbox"/> Yes <input type="checkbox"/> No - wait for balance material <input type="checkbox"/> Other                                  |             |                                                          |                  |
| Payment - due date                                                                                                                                                                                                                     |                  |                                                                                                                                                      |             |                                                          |                  |
| Remarks:                                                                                                                                                                                                                               |                  |                                                                                                                                                      |             |                                                          |                  |
| Approved by                                                                                                                                                                                                                            | Purchase Officer | Purchase Manager                                                                                                                                     | MD          | Accountant                                               | Accounts Manager |
| Name:                                                                                                                                                                                                                                  | [Signature]      | [Signature]                                                                                                                                          |             |                                                          |                  |
| Sign:                                                                                                                                                                                                                                  | [Signature]      | [Signature]                                                                                                                                          |             |                                                          |                  |
| Date:                                                                                                                                                                                                                                  | 4/8/23           |                                                                                                                                                      |             |                                                          |                  |
| Approval limit                                                                                                                                                                                                                         | Upto 20k         | Above 20k                                                                                                                                            | Above 100k  | Upto 20k                                                 | Above 20k        |

Notes: 1. In case amount to be credited to supplier and the bills total does not match, accountants to prepare JV for debit or credit.  
2. This set should only have 5 documents i.e., advice to credit to supplier, original bill, proof of delivery, original purchase order with barcode, original requisition. 3. Do not attach additional documents like weighment slips, RMC batch reports, duplicate documents, Eway bills, test reports, etc. 4. In Amount A, include transport, Hamali charges, etc., and instead include in Amount B. 5. This report must reach HO within one working day of approval by purchase officer/purchase manager.

**TAX INVOICE**

**V GREEN MEDIA Pvt. Ltd.**  
3-6-530/2, Street No 7, Himayathnagar  
Hyderabad - 500 029, T.S., India  
CIN: U74300AP2011PTC075248

|                                                                                                                          |                      |              |                   |
|--------------------------------------------------------------------------------------------------------------------------|----------------------|--------------|-------------------|
| To,<br>M/s <b>Modi Realty Genome Valley LLP</b><br>5-4-187/3 & 4, II nd Floor, M.G Road, Secunderabad-500003<br>Phone no | Invoice No.          | VGM-2324-196 | Date : 31-07-2023 |
|                                                                                                                          | Your P.O No.         | 20230802005  | Date : 02-08-2023 |
|                                                                                                                          | DC No :              |              | Date : 17-04-2023 |
|                                                                                                                          | Order Confirmed by : |              |                   |

| S. No | Description                                                                                      | HSN/ SAC | Qty      | Rate    | CGST % | SGST % | IGST % | Amount  |
|-------|--------------------------------------------------------------------------------------------------|----------|----------|---------|--------|--------|--------|---------|
| 1     | Advertisement<br>"BRGV Ad in Hindu"<br>Size:3.5x7<br>Publication:Hindu<br>Date of Pub:29-07-2023 | 998636   | 1<br>NOS | 2756.00 | 2.50   | 2.50   |        | 2756.00 |

|                   | OUR             | CUSTOMER        | Total Amount             | 2,756.00        |
|-------------------|-----------------|-----------------|--------------------------|-----------------|
| <b>GSTIN :</b>    | 36AADCV9375P12C | 36ABFFM3063P1ZU | Total CGST Amount        | 68.90           |
| <b>TIN No. :</b>  | 36641857335     |                 | Total SGST Amount        | 68.90           |
| <b>STC No. :</b>  | AADCV9375PSDC01 |                 | Total IGST Amount        |                 |
| <b>IT PAN No:</b> | AADCV9375P      |                 | <b>Grand Total (INR)</b> | <b>2,893.80</b> |

- Payment should be made by Crossed Demand Draft / Cheque in favour  
**M/s V GREEN MEDIA PVT. LTD.** payable at Hyderabad.
- Interest @ 24 % p.a. is charged on unrealised payments.
- Complaints /Clarifications will not be entertained after 7days of delivery.
- Subject to Hyderabad jurisdiction only. - E & O. E.

**Amount in Indian Rupees :**  
TWO THOUSAND EIGHT HUNDRED AND  
NINETY THREE AND PAISE EIGHTY ONLY

Bank Details : HDFC Bank Ltd.  
Panjagutta, Hyderabad.  
A/c : 50200033057768, IFSC CODE :

**For V Green Media Pvt Ltd.**

Receiver's Signature & Stamp

Prepared by

Checked by

Authorised Signatory

**From Company:** Modi Realty Genome Valley LLP  
5-4-187/3&4, 1Ind FloorSoham MansionM.G.Road  
Secunderabad, TELANGANA, 500003  
GSTNO:36ABFFM3063PIZU

**Delivery Location:** Bloomdale Residency at Genome Valley  
Sy. No-31 & 32Murharipally, Medchal Mandal.  
Hyderabad, Telangana, 500078  
Sarwar, 9502211499

**Supplier Details**

V Green Media Pvt.Ltd.  
3-6-530/3, 1st floor, street.no.7, (opp. lane of Minerva coffee shop) Himayathnagar,  
Hyderabad.  
Hyderabad, TG, 500029  
GSTIN:36AADCV9375P1ZC  
Accounts Department, 040 - 6646 4477  
info@vgreenmedia.com

|                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |             |  |                |  |                 |  |
|------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|-------------|--|----------------|--|-----------------|--|
| V Green Media Pvt.Ltd.<br>3-6-530/3, 1st floor, street.no.7, (opp. lane of Minerva coffee shop) Himayathnagar,<br>Hyderabad. |  |  |  |  |  |  |  |  |  |  |  | PO No       |  | 20230802005    |  | Quote No        |  |
| Hyderabad, TG, 500029<br>GSTIN:36AADCV9375P1ZC<br>Accounts Department, 040 – 6646 4477<br>info@vgreenmedia.com               |  |  |  |  |  |  |  |  |  |  |  | PO Date     |  | 02 Aug 2023    |  | Quote Date      |  |
|                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  | Supply Type |  | Purchase Order |  | Requisition Num |  |
|                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |             |  |                |  |                 |  |
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|                                                                                                                              |  |  |  |  |  |  |  |  |  |  |  |             |  |                |  |                 |  |

Rupees in words : Two Thousand Eight Hundred And Ninety Four Only.

**Terms and Conditions:-**

**Additional Specifications**

**Tax :**

**Delivery Date :**

**Delivery Location :**

**Transport:**

**Advance Paid :**

BRGV ad in Hindu Hyd on 29-07-2023

Inclusive of GST and other taxes.

Within \_\_\_ days of PO

As given above.

By Vendor or Purchaser

Nil. / \_\_\_ % of PO value.