

Admin-Audit Division  
Form for closure of purchase order - Manual

| PO no.: <u>86920</u>                                                                                                                                                                                                                | PO date: <u>27/12/21</u>                                                            | Req. no.: <u>192586</u>                                                            | Advice Scan ID                                                                   |                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------|
| Barcoded PO available <input type="checkbox"/> Y/ <input checked="" type="checkbox"/> N                                                                                                                                             | Invoice available <input type="checkbox"/> Y/ <input checked="" type="checkbox"/> N | original <input type="checkbox"/> Y/ <input checked="" type="checkbox"/> N         | Copy available <input type="checkbox"/> Y/ <input checked="" type="checkbox"/> N |                       |
| POD available <input type="checkbox"/> Y/ <input checked="" type="checkbox"/> N                                                                                                                                                     |                                                                                     |                                                                                    |                                                                                  |                       |
| Data required from site/engineers:                                                                                                                                                                                                  |                                                                                     |                                                                                    |                                                                                  |                       |
| MRN nos. related to PO <u>101587</u>                                                                                                                                                                                                |                                                                                     |                                                                                    |                                                                                  |                       |
| <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: <u>Total material received</u>                                                                                                                                                                                 |                                                                                     |                                                                                    |                                                                                  |                       |
| 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: <u>SK Goushee</u>                                                                                                                                                                                                      | Sign: <u>[Signature]</u>                                                            | Date: <u>4/12/23</u>                                                               |                                                                                  |                       |
| 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: <u>18,010</u>                                                         | Date of payment: <u>20-12-2021</u>                                               |                       |
| Details of part bill received:                                                                                                                                                                                                      |                                                                                     |                                                                                    |                                                                                  |                       |
| Sl. No.                                                                                                                                                                                                                             | Bill no.                                                                            | Bill date                                                                          | Bill amount                                                                      | Cr. given to supplier |
| 1.                                                                                                                                                                                                                                  |                                                                                     |                                                                                    |                                                                                  |                       |
| 2.                                                                                                                                                                                                                                  |                                                                                     |                                                                                    |                                                                                  |                       |
| 3.                                                                                                                                                                                                                                  |                                                                                     |                                                                                    |                                                                                  |                       |
| 4.                                                                                                                                                                                                                                  |                                                                                     |                                                                                    |                                                                                  |                       |
| Remarks by Accountants:                                                                                                                                                                                                             |                                                                                     |                                                                                    |                                                                                  |                       |
| Prepared by: <u>[Signature]</u>                                                                                                                                                                                                     | Sign: <u>[Signature]</u>                                                            | Date: <u>4/12/23</u>                                                               |                                                                                  |                       |
| 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.                                                                                                                                                                                                                                  | <u>175</u>                                                                          | <u>29/12/2021</u>                                                                  | <u>18000/-</u>                                                                   | <u>101587</u>         |
| 2.                                                                                                                                                                                                                                  | <u>1</u>                                                                            | <u>1</u>                                                                           | <u>1</u>                                                                         | <u>1</u>              |
| 3.                                                                                                                                                                                                                                  | <u>1</u>                                                                            | <u>1</u>                                                                           | <u>1</u>                                                                         | <u>1</u>              |
| 4.                                                                                                                                                                                                                                  | <u>1</u>                                                                            | <u>1</u>                                                                           | <u>1</u>                                                                         | <u>1</u>              |
| 5.                                                                                                                                                                                                                                  | <u>1</u>                                                                            | <u>1</u>                                                                           | <u>1</u>                                                                         | <u>1</u>              |
| Remarks: <u>Certified true copy received from vendor, need MD approval for close PO.</u>                                                                                                                                            |                                                                                     |                                                                                    |                                                                                  |                       |
| Prepared by: Ravi                                                                                                                                                                                                                   |                                                                                     | Sign: <u>[Signature]</u>                                                           | Date: <u>04/12/2023</u>                                                          |                       |
| 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 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:                                                                            |                       |

## Purchase Order

Page 1 of 1

04-12-2023 12:59:17

Original / Office Copy / Purchase Div. Copy

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                                                                              |  |            |              |
|-----------------------------------------------------------------------------------------------|--|------------|--------------|
| Shanmukha Lite Weight Brick Industries                                                        |  | Doc No     | 83920 192586 |
| H.no. 504, Nagaram, Keesara Mandal, Beside Icom Company, Keesara, Medchal, Hyderabad - 500083 |  | Doc Date   | 27-12-2021   |
| GSTIN 0                                                                                       |  | Quote No   | Nil          |
| 9676133699                                                                                    |  | Quote Date | 06-08-2021   |
|                                                                                               |  | SupplyType | Supply       |

Kind Attn : Mr. Y. Ravi Kumar

Purchase Order for the Supply of following Items.

| Item Name                                                         | Qty    | Rate  | Dis% | IGST | Amount    |
|-------------------------------------------------------------------|--------|-------|------|------|-----------|
| 1 1054 - Building material - CLC Block - 4in X 8 in X 24 in - Nos | 500.00 | 36.00 | 0.00 | 0.00 | 18,000.00 |
| Total Order Value . . .                                           |        |       |      |      | 18,000.00 |

Rupees : Eighteen Thousand Only.

### Terms and Conditions :-

|                   |                                                                                                                                                                                                                                                  |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Specification /   | Items shall be of 4.5 - 4.8N/M3 approx.Strength minimum QC report a must!                                                                                                                                                                        |
| Payment Terms     | 100% as advance at the time of delivery of all materials.                                                                                                                                                                                        |
| Tax               | All taxes included in above price.                                                                                                                                                                                                               |
| Delivery Date     | Next day.                                                                                                                                                                                                                                        |
| Delivery Location | Gulmohar Residency<br>Survey No 19, Mallapur, Hyderabad. NExt to NFC Railway Over Bridge<br>Phone. Contact: Security _____, 8309938133                                                                                                           |
| Penalty For Delay | Bills must be submitted to H.O. within 30days of supply of material. 10% pty on value of order will be deducted for delay in submission of bills.                                                                                                |
| Transportation    | Included in the above price.                                                                                                                                                                                                                     |
| Warranty          | Nil                                                                                                                                                                                                                                              |
| Advance Paid      | Rs. 18,000/- advance to be pay vide cheque no. , dtd.                                                                                                                                                                                            |
| Other Terms       | We reserve the right items not confirming to qty & specs. Breakage in your account. Above order for F block elevation work purpose.                                                                                                              |
| Completion Date   | Nil                                                                                                                                                                                                                                              |
| 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 **Shanmukha Lite Weight Brick Industries**

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

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

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

# Cement Blocks - Weekly Delivery Report

|                          |                                         |                          |             |                                       |             |
|--------------------------|-----------------------------------------|--------------------------|-------------|---------------------------------------|-------------|
| Company/ firm:           | Modi Realty                             | Requisition nos.:        | 187586      | Total PO quantity:                    | 500         |
| Project:                 | Mallapur LLP                            | PO No(s).                | 83920       | Quantity delivered in earlier period: |             |
| Block /Flat / Villa no.: | Gulmohar Residency                      | Total material delivered | yes         | Quantity delivered during week:       | 550         |
| Supplier:                | For f-block elevation work purpose      | Close PO:                | yes         | Balance quantity to be delivered:     |             |
| Sign of security         | Shanmukha lite weight bricks industries | Sign of Admin            | (Signature) | Sign of Project manager               | (Signature) |
| Date                     | 04/11/22                                | Date                     |             | Date                                  | 04/01/22    |

## Details of solid blocks - delivered in earlier period.

| S No. | Date | Time | Block Size & type | Quantity delivered | DC No. | Inward no. | MRN No. |
|-------|------|------|-------------------|--------------------|--------|------------|---------|
| 1.    |      |      |                   |                    |        |            |         |
| 2.    |      |      |                   |                    |        |            |         |

## Details of solid blocks - delivered during the week.

| S No | Date     | Time  | Block Size & type | Quantity delivered. | DC No. | Inward no. | MRN No. |
|------|----------|-------|-------------------|---------------------|--------|------------|---------|
| 1.   | 29.12.21 | 02:00 | 28"X8"X4"         | 500                 | 175    | 7077       | 101587  |
| 2.   |          |       |                   | 500                 |        |            |         |

Note: 1. Report to be sent to HO every Saturday with delivery challans of this week with photos. 2. Report must have totals calculated. 3. Specify block size and block type (solid / hollow). 4. Total quantity and delivered quantity includes all types of blocks.



GSTIN : 36AHPRR9748J4ZU  
36AGFPY1359K2ZT

TAX INVOICE

Cell : 9676133699

6302879575

# SHANMUKHA LITE WEIGHT BRICK INDUSTRIES

Manufacturers of Nano Lite CLC Bricks

Sy. No. 138, Kundanpally, Rampally 'X' Road, Keesara Mandal, Medchal Dist. - 501 301.

Name : Modi Realty Mallapur LLP

Address : 11th floor, Schemmanna  
M.G. Road Sec-6d

Buyer' GST No. : 36AAEFM1459R1ZP

Invoice No. : PONO 83920  
**175**

Invoice Date : 29/12/2021

Vehicle No. : AP19W1449

| Sl. No.                                                                                                                                                 | DESCRIPTION OF GOODS    | HSN Code | Quantity | Rate       | AMOUNT                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------|----------|------------|-----------------------|
| ①                                                                                                                                                       | CLC Blocks<br>(24x8x4") | —        | 500<br>1 | 34.20<br>1 | 17,100.00             |
| <div>INWARD<br/>MODI REALTY MALLAPUR LLP<br/>Ward No 7079 Dt 29/12/21<br/>MRN No 101587 Dt 03/01/22<br/>Received By: [Signature] Son: [Signature]</div> |                         |          |          |            | CGST 2.5 % 450/-      |
|                                                                                                                                                         |                         |          |          |            | SGST 2.5 % 450/-      |
|                                                                                                                                                         |                         |          |          |            | GRAND TOTAL 18,000.00 |

Rupees in words Eighteen thousand

## TERMS & CONDITIONS:

E.&O.E.

For Shanmukha Lite Weight Brick Industries

- Goods once sold will not be taken back or exchanged.
- Once the Invoice is created we can't change the Invoice.

[Signature]  
Authorised Signature