| | | DEB | IT VOUCHER | | |
|-----------------------------|--------|------------|---------------------|---------|---------------------|
| Company/Firm | GVRC | | | | |
| Project | Innopo | lis | | | |
| Voucher no. | | | | | |
| Account head | | | | | |
| Credit to | | | | | |
| Towards/description of work | Toward | ls payment | for petrol for site | expense | es. |
| Location of work | | | | | |
| Period | From: | 30.01.202 | 25 | To: | 05.02.2025 |
| Amount in Rs. | 500/- | | | | |
| Amount in words | Rupees | five hundr | ed only. | | |
| Mode of payment | Cheque | /trf no. | Date | | Bank |
| Prepared by S.Shravya | Approv | ed by | Receivers na | me | Receivers signature |

Notes: 1. Print full sheet. 2. To be used for all minor maintenance works. 3. Details of labour, hire charges, material may be printed/written overleaf. 4. Project may differ from location of work.









JSK FILLING STATION Dealer of Reliance BP Mobility Limited Sy no 8 Medchal- Malkajgiri(D) TS- 500078 Ph: 8328088443

RO ID: 7216 / RO Code: TLF048

INVOICE - Original Customer copy

Date: 05/02/2025 20:25:10

Inv: 25020513119

Product PETROL Qty 0.93 UoM Rate-Rs Amount-Rs

Litre 107.46 100.00

Total Invoice Amount: Method Of Payment:

Rs.100.00. CASH Rs.100.00

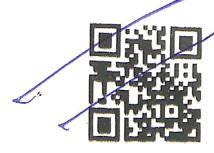
Amount Tendered:

RSL licence number 3 110/MDCL/2021 VAT and CST number: 36654606547 GST number : 36AAQFJ1644P1ZP,

Authorised Signatory JSK FILLING STATION

For Transconnect Card Related Queries Contact: 18008919023 (Toll Free) Jio-bp wishes you a safe journey Petrol bharo Sona Jeeto

FP-5/DSM-21 05/02/2025 20:25:23 Scan QR to view the future of mobility





JSK FILLING STATION Dealer of Reliance BP Mobility Limited Sy no 8

Medchal- Malkajgiri(D) TS- 500078 Ph: 8328088443

RO ID: 7216 / RO Code: TLF048 INVOICE - Original Customer copy

Date: 04/02/2025 11:45:15

Inv: 25020412410

Product Qty -UoM Rate-Rs Amount-Rs PETROL 0.93 Litre 107.46 100.00

Total Invoice Amount: Rs.100.00 Method Of Payment: CASH Rs.100.00 Amount: Tendered:

RSL licence number : 110/MDCL/2021

VAT and CST number : 36654606547 GST number : 36AAQFJ1644P1ZP

Authorised Signatory JSK FILLING STATION

For Transconnect Card Related Queries

Contact: 18008919023 (Toll Free) Jio-bp wishes you a safe journey Petrol bharo Sona Jeeto

FP-5/DSM-18 04702/2025 11:45:27 Scan QR to view the future of mobility





JSK FILLING STATION Dealer of Reliance BP Mobility Limited Sy no 8

Medchal- Malkajgiri(D) TS- 500078

Ph: 8328088443

RO ID: 7216 / RO Code: TLF048

INVOICE - Original Customer copy

Date: 01/02/2025 13:17:44

Inv: 25020108829

UoM ∤Rate÷Rs Amdunt-Rs Qty Product Litre 107.46 100.00 0.93 PETROL

Rs.100.00 Total Invoice Amount: Method Of Payment: CASH

Amount Tendered:

Rs.100.00

RSL licence number: 110/MDCL/2021 VAT and CST number: 36654606547 GST number : 36AAQF31644P1ZP

Authorised Signatory JSK FILLING STATION

For Transconnect Card Related Queries

Contact: 18008919023 (Toll Free) Jio-bp wishes you a safe journey Petrol bharo Sona Jeeto

FP-4/DSM-33 01/02/2025 13:17:53 Scan QR to view the future of mobility







Welcomes

¥SREE KASHI VISHWANATH ≦SY.NO-206 GENOME VALLEY ROAD ≅THURKAPALLY Tel. No.:

Receipt No.: A4508 Local ID 00433763 FIP No. 01 Nozzle No. : 03 Product : Petrol Density// 753.0Kg/Cu.mtr BPreset Type:/ Amount Rate(Rs/L) 107.49 >Volume(L) 00000,93 žAmount(Rs) : 00100.00 Atot: 00810531549.15 Vtot: 00000769971 17

Vehicle No: Not Entered Mobile No : Not Entered

Date : 31/01/25 Time: 09:15

CST No 36APOPP0590F1ZN IST No VAT No ATTENDANT

· Not Available ID FCC DATE Not Available ₹CC TIME : Not Available



JSK FILLING STATION Dealer of Reliance BP Mobility Limited Sy no 8 Medchal- Malkaigiri(D) TS- 500078 Ph: 8328088443

RO ID: 7216 / RO Code: TLF048

INVOICE - Original Customer copy

Date: 30/01/2025 11:43:20

Inv: 25013011117

Product -Qty UoM Rate-Rs Amount-Rs 0.93 Litre 107.46 100.00

Total Invoice Amount: Rs.100.00 lethod Of Payment: CASH Imount Tendered: Rs.100.00

RSL licence number : 110/MDCL/2021 JAT and CST number : 36654606547

GST number : 36AAQFJ1644P1ZP

Authorised Signatory JSK FILLING STATION

For Transconnect Card Related Queries

Contact: 18008919023 (Toll Free) Jio-bp wishes you a safe journey

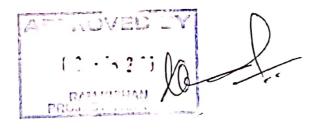
Petrol bharo Sona Jeeto

FP-4/DSM-21 30/01/2025 11:43:44 Scan QR to view the future of mobility



| | | DEBIT | VOUCHER | | |
|-----------------------------|---------|-----------------|-------------------|----------|---------------------|
| Company/Eirm | Dr.Nrk | Bio Tech Pvt | l_td | | |
| Project | Nextop | olis | | | |
| Voucher no. | | | | | |
| Account head | | | | | |
| Credit to | | | | | |
| Towards/description of work | Towards | s amount paid f | or refreshments a | t site o | during visit of MD |
| Location of work | | | | | |
| Period | From: | 29.01.2025 | | To: | 05.02.2025 |
| Amount in Rs. | 300/- | | | | |
| Amount in words | Three h | undred only. | | | |
| Mode of payment | Cheque | trf no. | Date | | Bank |
| Prepared by S.Shravya | Approv | | Receivers name | е | Receivers signature |

Notes: 1. Print full sheet. 2. To be used for all minor maintenance works. 3. Details of labour, hire charges, material may be printed/written overleaf. 4. Project may differ from location of work.



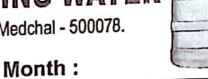
DELIVERY CARD

SRI DURGA PACKAGED DRINKING WATER



Address: Genome valley, Thurkapally, Shamirpet, Medchal - 500078.

Cell: 8919451828, 9381439550



| Nam | ne : D | r. NRI | 5. (7) | Daj< | pally |) (Ja | nuary- |
|------|------------------|--------|------------|----------------|------------------|----------------|------------|
| Date | No of Bo Full | | Cust.Sign. | Date | No of Bo Full | ottles Emty | Cust.Sign. |
| 1 | | | _ | 17 | 07 | | 1 |
| 2 | 07 | | 4 | 18 | 03 | | |
| 3 | 05. | •, | A | . 19 | | | - |
| 4 | 08 | . • | 4 | 20 | 09 | | A |
| 5 | _ | , , | | . 21 | | - | |
| 6 | 07 | | | 22 | 09 | | A |
| 7 | 05 | | A | -23 | -02 | | 4 |
| 8 | 04 | | 1 | _24 | Ø S | | 4 |
| 9 | 07 | | 1 | -25 | 74 | | 4 |
| 10 | 06 | | 1 | -26 | | _ | |
| 11 : | 05 | | A | 27 | 06 | | 1 |
| 12 | 1 | | | 28 | 02 | | 1 |
| 13 | 06 | | 1 | 29 |) 2 | | 1 |
| 14 | | | | 30 | | _ | |
| 15 | 04 | | 1 | -31 | 08 | | A |
| 16 | | _ | - | Tota | al Cans_ | 10 Pr & | and of |

| | | DEBIT V | VOUCHER | | |
|-----------------------------|----------|-----------------|--|---------|---------------------------|
| Company/Firm | Dr.Nrk | Bio Tech Pvt | Ltd | | |
| Project | Nextop | olis | | | |
| Voucher no. | | | | | |
| Account head | | | | | |
| Credit to | | | | | |
| Towards/description of work | Drinking | water for the r | for drinking wat month of January. th amount Rs.2440 | | aid to Sri Durga Packaged |
| Location of work | | | | | |
| Period | From: | 29.01.2025 | | To: | 05.02.2025 |
| Amount in Rs. | 2440/- | | | | |
| Amount in words | Rupees | two thousand | four hundred and | l forty | only. |
| Mode of payment | Cheque | trf no. | Date | | Bank |
| Prepared by | Approv | ed by | Receivers name | e | Receivers signature |
| S.Shravya | 0.77 | | | | orlin 3 Details of labour |

Notes: 1. Print full sheet. 2. To be used for all minor maintenance works. 3. Details of labour, hire charges, material may be printed/written overleaf. 4. Project may differ from location of work.



Weekly - Petty cash /expense card statement.

| Name | DR.NRK BIOTECH PVT LTD | FCH PVT LTD | Statement date 06 02 25 | | | | |
|-----------------------|------------------------|------------------------|--|-------------------------|-----------------|------------------|----------|
| Prepared by | N.RAMKISHAN | Z | | 1 | | | |
| From period | 30.01.25 | | To period 05.02.25 | | | | |
| Sl No Debit | Debit to company | Debit to project | Description of expense | | Amount | Bill enclosed | GST bill |
| 1. DR.NRK PVT LTD | RK BIOTECH | Nextopolis | Towards payment for staff refreshmen MD visit / | t at site during | 300/- | NO AD AD AD | NO AO |
| 2. DR.NRK PVT LTD | DR.NRK BIOTECH | Nextopolis | payment made to water supply- for the | kaged | 2440/- | NO AO | N An |
| | | | | N | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Total | | | | 2: | 2740/- | | |
| Amount to credited by | be | èr to Haapay card, | ☐ Transfer to Haapay card, ☐ Transfer to expense card, ☐ Cash reimbursement, ☐ Transfer to personal a/c. ☐ Other: | Cash reimbursement, 1 7 | ransfer to pers | onal a/c. | |
| Approved by: | Div. Manager | ıager | Accountant | Accounts Manager | MD | | |
| Sign: | | | | | | | |
| Date: | | | | | | | |
| ONL I Connad | -f 1h -1-1 h -1 | anhantal before some D | only 16 file district the character from 2 Occidents to the standard to th | | | | - |

00Notes: I Scanned copy of this statement to be submitted before every Friday 2pm 2. Original vouchers to be attached to this statement and send to respective accountant by Monday 3. Accountants to make payment on receipted of scanned statement on Saturday 4. If original statement with vouchers of last week is not received withhold further payment and salary: 5. Employee must maintain photocopy of all bills/vouchers for 3 months. 6. Division manager and accounts manager approval required for expenses of over 2,000/- per week. MDs approval is required for expenses of over 10,000/- per week.