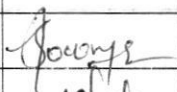


**PURCHASE DIVISION**  
Advice for approval for credit to supplier

|                                                               |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------------|------------------|
| Date:                                                         |                                                                                     | 18/7/20.                       |                     | Prepared by:                                                                                                                                                              |                                                                     | SOWMYA       |                  |
| PO/WO no.                                                     |                                                                                     | 68764                          |                     | PO / WO Date.                                                                                                                                                             |                                                                     | 10/7/20.     |                  |
| Supplier Name                                                 |                                                                                     | SSlp.                          |                     | PO/WO amount                                                                                                                                                              |                                                                     | 1,737        |                  |
| Firm/Company                                                  |                                                                                     | Vista homes owners Association |                     | Project                                                                                                                                                                   |                                                                     | Vista homes. |                  |
| Sl. No.                                                       | Bill No.                                                                            | Bill Date                      |                     | Bill amount                                                                                                                                                               |                                                                     |              |                  |
| 1.                                                            | 12346                                                                               | 17/7/20.                       |                     | 1,737                                                                                                                                                                     |                                                                     |              |                  |
| 2.                                                            |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| 3.                                                            |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| Amount A – Bills total(Excluding Transport & Hamali Charges): |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     | 1,737        |                  |
| Sl. No.                                                       | DC No                                                                               | DC. Date                       |                     | MRN No.                                                                                                                                                                   | DC matches MRN                                                      |              |                  |
| 1.                                                            | 10379                                                                               | 17/7/20                        |                     | 81221                                                                                                                                                                     | <input checked="" 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 B –Other Credits :                                     |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| Amount C –Other Debits :                                      |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| Amount D (D=A+B-C) – Amount to be credited to the supplier:   |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     | 1,737        |                  |
| Amount E – PO / WO value:                                     |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     | 1,737        |                  |
| Amount F – Difference (A – E):                                |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| Quantity received as per PO /WO                               |                                                                                     |                                |                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Excess received <input type="checkbox"/> Short received <input type="checkbox"/> Other (explained below) |                                                                     |              |                  |
| Is difference between PO / Bill acceptable?                   |                                                                                     |                                |                     | <input type="checkbox"/> Yes <input type="checkbox"/> No (explained below)                                                                                                |                                                                     |              |                  |
| Excess / short material received                              |                                                                                     |                                |                     | <input type="checkbox"/> Approved – within acceptable limits <input type="checkbox"/> No (explained below)                                                                |                                                                     |              |                  |
| Close PO / W?O                                                |                                                                                     |                                |                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – wait for balance material <input type="checkbox"/> No (explained below)                             |                                                                     |              |                  |
| Advance paid / PDC given (deduct when paying)                 |                                                                                     |                                |                     | <input type="checkbox"/> Yes – Rs. /- <input checked="" type="checkbox"/> No                                                                                              |                                                                     |              |                  |
| Payment – due date                                            |                                                                                     |                                |                     | 25.7.2020                                                                                                                                                                 |                                                                     |              |                  |
| Remarks:                                                      |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
|                                                               |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
|                                                               |                                                                                     |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| Approved by                                                   | Purchase Officer                                                                    | Purchase Manager               | Procurement Manager | MD                                                                                                                                                                        | Accounts – receiver of bill                                         | Accountant   | Accounts Manager |
| Sign:                                                         |  |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |
| Date                                                          | 18/7/20                                                                             |                                |                     |                                                                                                                                                                           |                                                                     |              |                  |

Notes: 1. In case amount to be credited to supplier and the bills total does not match prepare JV for debit or credit. 2. Attach additional sheets if quantity of bills or DCs is more than the space provided. Clearly mark the space provided with 'see attachment'. 3. Purchase Officer can approve Pos/Wos upto Rs. 5,000/-, Purchase Manager and Procurement Manager to approve all bills from 5,000/- to 1,00,000/- . 4. Attach JV, Office copy of PO/WO, DCs and bills to this advice. 5. In Amount A, exclude transport, Hamali charges, etc and instead include in Amount B. 6. To be approved by accounts manager if bill value exceeds Rs. 10,000/- 7. MD to approve all bills above 1,00,000/-

## TAX INVOICE

ORIGINAL INVOICE

**Summit Sales LLP**

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G.Road, Secunderabad - 500003

Email: purchase@modiproperties.com

Supplier / Customer / Transporter - Copy

**GSTIN/UNI: 36ACQFS2044C1Z7**

1 of 1 : 17-07-2020

| Customer Details                                                             |                                                     |        |         | Invoice No.          |        | 12346      |      |         |
|------------------------------------------------------------------------------|-----------------------------------------------------|--------|---------|----------------------|--------|------------|------|---------|
| Vista Homes Owners Association<br>Sy.no.193, Kapra, Ecil<br><br>GSTIN : 36   |                                                     |        |         | Invoice Date.        |        | 17-07-2020 |      |         |
|                                                                              |                                                     |        |         | PO No.               |        | 68764      |      |         |
|                                                                              |                                                     |        |         | PO Date.             |        | 10-07-2020 |      |         |
|                                                                              |                                                     |        |         | Req ID               |        | 58378      |      |         |
|                                                                              |                                                     |        |         | Req Date             |        | 10-07-2020 |      |         |
|                                                                              |                                                     |        |         | Loc Req No           |        | 99712      |      |         |
|                                                                              | Description of Goods                                |        | HSN/SAC | Qty                  | Rate   | Gross      | Tax% | Tax Amt |
| 1                                                                            | 4022 - Consumables - Dettol - NA - nos              |        | 3401    | 6                    | 65.00  | 390.00     | 18   | 70.20   |
| 2                                                                            | 4113 - Consumables - sodium hypochlorite - 5 Ltrs - |        |         | 1                    | 892.50 | 892.50     | 18   | 160.64  |
| 3                                                                            | 4112 - Consumables - Sanitizer - 500 ml - Nos       |        |         | 1                    | 200.00 | 200.00     | 12   | 24.00   |
| 4                                                                            |                                                     |        |         |                      |        |            |      |         |
| 5                                                                            |                                                     |        |         |                      |        |            |      |         |
| 6                                                                            |                                                     |        |         |                      |        |            |      |         |
| 7                                                                            |                                                     |        |         |                      |        |            |      |         |
| 8                                                                            |                                                     |        |         |                      |        |            |      |         |
| 9                                                                            |                                                     |        |         |                      |        |            |      |         |
| 10                                                                           |                                                     |        |         |                      |        |            |      |         |
| 11                                                                           |                                                     |        |         |                      |        |            |      |         |
| 12                                                                           |                                                     |        |         |                      |        |            |      |         |
| 13                                                                           |                                                     |        |         |                      |        |            |      |         |
| 14                                                                           |                                                     |        |         |                      |        |            |      |         |
| 15                                                                           |                                                     |        |         |                      |        |            |      |         |
| IGST                                                                         |                                                     | CGST   | SGST    | Total Taxable Amount |        | 1,482.50   |      | 254.84  |
|                                                                              |                                                     | 127.42 | 127.42  | Total Invoice Amount |        | 1,737.35   |      |         |
| Rupees : One Thousand Seven Hundred Thirty Seven and Paise Thirty Five Only. |                                                     |        |         |                      |        |            |      |         |

Subject to Hyderabad Jurisdiction



for Summit Sales LLP

*[Signature]*  
Authorised signatory

## Purchase Order

Page(s) 1 Of 1

10-07-2020 14:57:50



68764

08.07.20 3:08:59

From Company : **Vista Homes Owners Association**  
5-4-187/3 & 4, IIInd Floor, M.G.Road, Secunderabad - 500003  
G S T No. : .

### Supplier Details

Summit Sales LLP  
5-4-187/3&4, II nd floor, Soham Mansion, MG Road, Secunderabad

GSTIN 36ACQFS2044C1Z7

040-66335551

9618244433

|            |            |       |
|------------|------------|-------|
| Doc No     | 68764      | 99712 |
| Doc Date   | 10-07-2020 |       |
| Quote No   | Nil        |       |
| Quote Date | 10-07-2020 |       |
| SupplyType | Supply     |       |

**Kind Attn : Hamendra,Prabhakar**

Purchase Order for the Supply of following Items.

| Item Name                                                 | Qty  | Rate   | Dis% | GST   | Amount   |
|-----------------------------------------------------------|------|--------|------|-------|----------|
| 1 4022 - Consumables - Dettol - NA - nos                  | 6.00 | 65.00  | 0.00 | 18.00 | 460.20   |
| 2 4113 - Consumables - sodium hypochlorite - 5 Ltrs - Nos | 1.00 | 892.50 | 0.00 | 18.00 | 1,053.15 |
| 3 4112 - Consumables - Sanitizer - 500 ml - Nos           | 1.00 | 200.00 | 0.00 | 12.00 | 224.00   |
| Total Order Value . . .                                   |      |        |      |       | 1,737.35 |

Rupees : One Thousand Seven Hundred Thirty Seven and Paise Thirty Five Only.

### Terms and Conditions :-

**Specification / Brand** As per details given in the quotation.**Payment Terms** After Delivery & Production of bill**Tax** Inclusive of all taxes**Delivery Date** Next Day.

**Delivery Location** Vista Homes  
Sy. No. 193, Kapra, Hyd. From ECIL take left in lane opposite MRR school  
Phone. Contact: 8790166611

**Penalty For Delay** Nil**Transportation Cost** Transport cost shall be borne by us.**Warranty** Nil**Advance Paid** Nil**Other Terms** We reserve the right items not confirming to qty & specs. Above order for Labour and staff safety use purpose**Completion Date** Nil**Measurment** Nil**Security** Nil**Remarks**For **Vista Homes Owners Association**

Authorised Signatory

Accepted the above Terms And Conditions

For **Summit Sales LLP**

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

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

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

### Requisition Form

|                                |  |                                |  |          |  |          |  |
|--------------------------------|--|--------------------------------|--|----------|--|----------|--|
| Company Name:                  |  | Vista Homes owners association |  | Date:    |  | 09.07.20 |  |
| Site & Phase :                 |  | Vista Homes                    |  | Time:    |  | 13:20    |  |
| Supplier:                      |  |                                |  | Req. No. |  | 99712    |  |
| Material required before date: |  | 11.07.20                       |  | ID No.   |  | 58378    |  |

| No | Description           | Size   | Quantity | Units | Inward No | Date |
|----|-----------------------|--------|----------|-------|-----------|------|
| 1  | Sodium Hydro chloride | 05ltrs | 03       | No's  |           |      |
| 2  | Sanitizer             |        | 03       | No's  |           |      |
| 3  | Hand wash             |        | 06       | No's  |           |      |
| 4  |                       |        |          |       |           |      |
| 5  |                       |        |          |       |           |      |
| 6  |                       |        |          |       |           |      |
| 7  |                       |        |          |       |           |      |
| 8  |                       |        |          |       |           |      |
| 9  |                       |        |          |       |           |      |
| 10 |                       |        |          |       |           |      |

PO  
68764

APPROVED

13 JUL 2020

MINISH PARIKH  
MANAGER PROCUREMENT

Remarks: For Site use purpose.

|             |  |            |  |              |  |  |  |
|-------------|--|------------|--|--------------|--|--|--|
| Prepared By |  | T.Madhu    |  | Approved by  |  |  |  |
| Sign.& Date |  | 09.07.2020 |  | Sign. & Date |  |  |  |

Note: On receipt of material at site write inward number and date in last 2 columns.

### Requisition Form

|                                |  |             |  |          |  |            |  |
|--------------------------------|--|-------------|--|----------|--|------------|--|
| Company Name:                  |  | Vista Homes |  | Date:    |  | 06.07.2020 |  |
| Site & Phase :                 |  | Vista Homes |  | Time:    |  | 11:15      |  |
| Supplier                       |  |             |  | Req. No. |  |            |  |
| Material required before date: |  | 10.07.2020  |  | ID No.   |  |            |  |

| No | Description | Size | Quantity | Units | Inward No | Date |
|----|-------------|------|----------|-------|-----------|------|
| 1  |             |      |          |       |           |      |
| 2  |             |      |          |       |           |      |
| 3  |             |      |          |       |           |      |
| 4  |             |      |          |       |           |      |
| 5  |             |      |          |       |           |      |
| 6  |             |      |          |       |           |      |
| 7  |             |      |          |       |           |      |
| 8  |             |      |          |       |           |      |

Remarks: For Site Use purpose

|             |  |            |  |              |  |  |  |
|-------------|--|------------|--|--------------|--|--|--|
| Prepared By |  | T.Madhu    |  | Approved by  |  |  |  |
| Sign.& Date |  | 06.07.2020 |  | Sign. & Date |  |  |  |

Note: On receipt of material at site write inward number and date in last 2 columns.

## DELIVERY CHALLAN

**Summit Sales LLP**

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G.Road, Secunderabad - 500003

Email: purchase@modiproperties.com

Supplier / Customer / Transporter - Copy

**GSTIN/UNI: 36ACQFS2044C1Z7**

1 of 1 : 17-07-2020

| Customer Details               |                                                         | DC No.     | 10379      |
|--------------------------------|---------------------------------------------------------|------------|------------|
| Vista Homes Owners Association |                                                         | DC Date.   | 17-07-2020 |
| Sy.no.193, Kapra, Ecil         |                                                         | PO No.     | 68764      |
|                                |                                                         | PO Date.   | 10-07-2020 |
|                                |                                                         | Req ID     | 58378      |
|                                |                                                         | Req Date   | 10-07-2020 |
| GSTIN : 36                     |                                                         | Loc Req No | 99712      |
|                                | Description of Goods                                    | HSN/SAC    | Qty        |
| 1                              | 4022 - Consumables - Dettol - NA - nos                  | 3401       | 6          |
| 2                              | 4113 - Consumables - sodium hypochlorite - 5 Ltrs - Nos |            | 1          |
| 3                              | 4112 - Consumables - Sanitizer - 500 ml - Nos           |            | 1          |
| 4                              |                                                         |            |            |
| 5                              |                                                         |            |            |
| 6                              |                                                         |            |            |
| 7                              |                                                         |            |            |
| 8                              |                                                         |            |            |
| 9                              |                                                         |            |            |
| 10                             |                                                         |            |            |
| 11                             |                                                         |            |            |
| 12                             |                                                         |            |            |
| 13                             |                                                         |            |            |
| 14                             |                                                         |            |            |
| 15                             |                                                         |            |            |
| 16                             |                                                         |            |            |
| 17                             |                                                         |            |            |
| 18                             |                                                         |            |            |
| 19                             |                                                         |            |            |
| 20                             |                                                         |            |            |
| 21                             |                                                         |            |            |
| 22                             |                                                         |            |            |
| 23                             |                                                         |            |            |
| 24                             |                                                         |            |            |
| 25                             |                                                         |            |            |
| 26                             |                                                         |            |            |
| 27                             |                                                         |            |            |
| 28                             |                                                         |            |            |
| 29                             |                                                         |            |            |
| 30                             |                                                         |            |            |

Subject to Hyderabad Jurisdiction

| INWARD           |             |
|------------------|-------------|
| Inward No: 24975 | Dt: 17/7/20 |
| IRN No: 81271    | Dt:         |
| Received By:     | Sign:       |
| Vista Homes      |             |

for Summit Sales LLP

Authorised signatory



## TAX INVOICE

**Summit Sales LLP** TRANSIT COPY

#5-4-187/3 &amp; 4, II Floor, Soham Mansion, M.G.Road, Secunderabad - 500003

Email: purchase@modiproperties.com

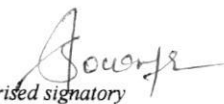
Supplier / Customer / Transporter - Copy

**GSTIN/UNI: 36ACQFS2044C1Z7**

1 of 1 : 17-07-2020

| Customer Details                                                             |                                                     |         |        | Invoice No.          |        | 12346      |         |
|------------------------------------------------------------------------------|-----------------------------------------------------|---------|--------|----------------------|--------|------------|---------|
| Vista Homes Owners Association<br>Sy.no.193, Kapra, Ecil<br><br>GSTIN : 36   |                                                     |         |        | Invoice Date.        |        | 17-07-2020 |         |
|                                                                              |                                                     |         |        | PO No.               |        | 68764      |         |
|                                                                              |                                                     |         |        | PO Date.             |        | 10-07-2020 |         |
|                                                                              |                                                     |         |        | Req ID               |        | 58378      |         |
|                                                                              |                                                     |         |        | Req Date             |        | 10-07-2020 |         |
|                                                                              |                                                     |         |        | Loc Req No           |        | 99712      |         |
|                                                                              | Description of Goods                                | HSN/SAC | Qty    | Rate                 | Gross  | Tax%       | Tax Amt |
| 1                                                                            | 4022 - Consumables - Dettol - NA - nos              | 3401    | 6      | 65.00                | 390.00 | 18         | 70.20   |
| 2                                                                            | 4113 - Consumables - sodium hypochlorite - 5 Ltrs - |         | 1      | 892.50               | 892.50 | 18         | 160.64  |
| 3                                                                            | 4112 - Consumables - Sanitizer - 500 ml - Nos       |         | 1      | 200.00               | 200.00 | 12         | 24.00   |
| 4                                                                            |                                                     |         |        |                      |        |            |         |
| 5                                                                            |                                                     |         |        |                      |        |            |         |
| 6                                                                            |                                                     |         |        |                      |        |            |         |
| 7                                                                            |                                                     |         |        |                      |        |            |         |
| 8                                                                            |                                                     |         |        |                      |        |            |         |
| 9                                                                            |                                                     |         |        |                      |        |            |         |
| 10                                                                           |                                                     |         |        |                      |        |            |         |
| 11                                                                           |                                                     |         |        |                      |        |            |         |
| 12                                                                           |                                                     |         |        |                      |        |            |         |
| 13                                                                           |                                                     |         |        |                      |        |            |         |
| 14                                                                           |                                                     |         |        |                      |        |            |         |
| 15                                                                           |                                                     |         |        |                      |        |            |         |
| IGST                                                                         |                                                     | CGST    | SGST   | Total Taxable Amount |        | 1,482.50   | 254.84  |
|                                                                              |                                                     | 127.42  | 127.42 | Total Invoice Amount |        | 1,737.35   |         |
| Rupees : One Thousand Seven Hundred Thirty Seven and Paise Thirty Five Only. |                                                     |         |        |                      |        |            |         |

for Summit Sales LLP

  
 Authorised signatory

Subject to Hyderabad Jurisdiction