

Annexure- XI

Consolidated Report on lifting of Buy back items for the Division Office:-

The details of buyback items which were not collected from different locations are given below.

| Office name/Code | Machine Sl.No. | Inventory No. | H/w Type | Problem faced for lifting the buy back item | Person/s contacted |
|-------------------------|-----------------------|----------------------|-----------------|--|---------------------------|
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Signature of the vendor representative

Name of the vendor representative

Date:

Name of the Company

NB: Please mention date of visit and nature of problems which were encountered by the vendor while picking up the H/w item from the Branch

To be submitted in (1+2) {1 to Manager (IT), 1 to RM (IT) & 1 to CO(IT) }