

## Implementation Sign-Off

Client	Indian Immunologicals Limited			
Plant Location	CDC, Sy No.281-284 & 321, Karakapatla, Indian Immunologicals Limited, Hyderabad, Telangana 502281			
Client PO Ref #	PO No. 4511002888, 20/09/2019			
Solution Name	HARDWARE INSTALLATION & TRAINING.			
Solution/PO Components	HARDWARE	Qty (UoM)	*Implemented Yes/No	*Date of Implementation
SCANNERS	S19037523021244	01	YES	10/12/2019
PRINTERS	18J192004904	01	YES	10/12/2019

*\*Mandatory fields. Effective AMC due dates are derived from the date of implementation.*

Department Representatives:				
PharmaSecure	Name	Sharique Rahi	Title	Product Specialist
	Mobile	+91 7384206177	Email	srahi@pharmasecure.com
Client 1	Name	Mr. Viswanath Kanda	Title	Senior Officer (IT)
	Mobile	+919666443383	Email	k.viswanath@indimmune.com
	Signature			
Client 2	Name		Title	
	Mobile		Email	
	Signature			

MOM/Remarks (Please capture minutes here/attach a separate sheet, if needed. But sign-off on this document is mandatory for PharmaSecure internal audit records)

I certify that above PharmaSecure solution/component(s) have been successfully deployed and is operational:

For (Company) Indian Immunologicals Limited

Signature: \_\_\_\_\_

Representative Name: Mr. Viswanath Kanda

Designation: Senior Officer (IT)

Date: 10/12/2019

For PharmaSecure

Signature: \_\_\_\_\_

Representative Name: Sharique Rahi

Designation: Product Specialist

Date: 10/12/2019



Signature: Sharique Rahi  
10/12/19

### Implementation Sign-Off

Client	Indian Immunologicals Limited			
Plant Location	Rakshapuram, Opposite to Stadium, Gachibowli, Indian Immunologicals Limited, Hyderabad, Telangana 500032			
Client PO Ref #	PO No. 4511002888, 20/09/2019			
Solution Name	HARDWARE INSTALLATION & TRAINING.			
Solution/PO Components	HARDWARE	Qty (UoM)	*Implemented Yes/No	*Date of Implementation
SCANNERS	S19037523021244 S19063523020587	02	YES	09/12/2019
PRINTERS	18J192004658 18J192004662	02	YES	09/12/2019

*\*Mandatory fields. Effective AMC due dates are derived from the date of implementation.*

Department Representatives:				
PharmaSecure	Name	Sharique Rahi	Title	Product Specialist
	Mobile	+91 7384206177	Email	srahi@pharmasecure.com
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Representative Name: Mr. Viswanath Kanda

Designation: Senior Officer (IT)

Date: 09/12/2019



For PharmaSecure

Signature: Sharique Rahi  
09/12/19

Representative Name: Sharique Rahi

Designation: Product Specialist

Date: 09/12/2019