

Sl. No.	Name of authorised representative, if any	Name of work man	Identification No.	Details of claim		Details of claim admitted				Amount of contingent claim	Amount of any mutual dues that may be set-off	Amount of claim under verification	Amount of claim not admitted	Remarks, if any
				Date of receipt	Amount claimed	Amount of claim admitted	Nature of claim	Whether related party?	% voting share in CoC, if applicable					
NIL														



*T. Adinarayana*  
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INTERIM RESOLUTION PROFESSIONAL  
SRI EKSHWAKA SANDS PVT LIMITED