# Company Name:

Address:

Phone No.: Email ID: GSTIN:

State:

**Bill of Material**

# Bill of Matarials

**For:**

Address:

Phone No.: Email ID: GSTIN:

State:

# Shipping Address:

Bill Of Material

No.:

Date:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SL. No.** | **Item Name** | **HSN/SAC** | **Quantity** | **Unit** | **Amount** |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Terms And Conditions: | **Total Amount:** |  |

Amount In Rupees:

# Received By

Name: Date:

Signature:

Description:

Comment:

# Received By

Name: Date:

Signature:

Comment: Company Seal & Signature