

Name of supplier (Company / Firm Name)									
Sr. No.	Name of Item	Unit	Approx Quantity Required	MRP	Discount	Net Rate	GST Rate	GST Amount	Total Price
1	AS PER FORMAT								
2									
3									
4									
5									
6									
7									
8									
9									
10									
A	Freight								Including / Extra
B	Packing								Including / Extra
C	Insurance								Including / Extra
D	Loading & Unloading								Including / Extra
E	Other Charges								Including / Extra