

COMPANY:
Physical Address:
P.O. BOX:
Tel:

BIN CARD

Depositor Name.....Stake No:-.....

Date:.....

Balance Brought Forward.....

Date	PDN/ORDER Number	Bags Received	Weight Received (Kgs)	Bags Issued	Weight Issued (Kgs)	Total on the Stake	W/Supervisor Signature

Total Carried Forward.....