

Automotive Parts Packing List Submission Form

Date

Submitted By

Company Name

Contact Email

Shipping Address

Packing List No.

PO Number

Shipment Method

Parts List

No	Part Name	Part Number	Quantity	Unit	Remarks
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Additional Notes

Signature

Date Signed