



The All India Glass Manufacturers Federation

INDIAN GLASS DIRECTORY

PROFORMA – IV – To be completed by Exporters of glass and glassware

Please tick mark (✓) whichever is applicable

1. Name & Address of the Company : _____

Pin Code : _____
Telephone No. : _____ Fax: _____
E- mail Address : _____ Website : _____
2. **Chief Executive :**
 - I. Name : _____ Designation : _____
 - II. Tel/Mobile No. : _____ Fax: _____
 - III. E- mail : _____
3. **Contact Person :**
 - I. Name : _____ Designation : _____
 - II. Tel/Mobile No. : _____ Fax: _____
 - III. E- mail : _____
4. Annual Turnover (2010-11) Value in Rs. Lakhs : _____
5. Products Exported : _____
6. Any other information (in brief) : _____

**THE PROFORMA DULY COMPLETED MAY PLEASE BE SENT
TO SECRETARY, AIGMF AT THE ABOVE ADDRESS**