



Central University of Jharkhand, Ranchi
Requisition form for Stationary / Furniture

Name of the Centre / Dept. /Office _____

Sl. No.	Name of Items	Quantity Required	Received Quantity	Remarks
1.				
2.				
3.				
4.				
5.				
6.				

Full Name in Capital letters _____

Designation _____

Signature with date _____

FOR STORE SECTION

Forwarded by Centre Head

Forwarded by Store In charge:

Issued by:

Received by:

Signature

Signature

Signature

Signature

Full Name:

Designation



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