

Supplies Request Slip

(Physical Assets/ Property Custodian)



Staff Name: _____ Signature: _____

Division: _____

Date and Time: _____

Office Supply:

Consumables:

Campus Maintenance:

ITEMS:

No.	Materials, Tools, and Equipment (Specify Description/ Brand)	Quantity

NOTED BY:

JASON O. HERRERA

Property Custodian Officer

APPROVED BY:

Division Head

Signature Over Printed Name

NOTE: Claim slips need to be signed and approved by the appropriate Division Head in order to be considered eligible for release.

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