

## STATIONERY DEMAND

Please complete this demand request for your necessary Stationery further process.

**Demanding by:** \_\_\_\_\_ **Employee Name**

**Department:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Item Required List

S.No	Item Name	Required Quantity
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Signature employee

Signature HR Dept.