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OFFICE SUPPLY & EQUIPMENT REQUISITION FORM

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Purpose: Employees submit this form to request office supplies, IT equipment, or furniture.

- **Date of Request:** _____
- **Requested By (Employee Name & Dept.):** _____
- **Item Requested:** _____
- **Quantity Required:** _____
- **Reason for Request:** _____
- **Urgency Level (Check One):**

  ☐ High (Essential for Work) ☐ Medium (Needed Soon) ☐ Low (Routine Request)

Admin Review & Approval: ☐ Approved ☐ Not Approved

Admin Remarks: _____

Stock Availability: ☐ Available ☐ Needs Procurement

Expected Delivery Date: _____

Received By (Signature & Date): _____

Usage Instructions:

- ☑ Employees must **specify the exact items and quantity needed**.
- ☑ The Admin Team **checks inventory availability before approval**.
- ☑ If stock is unavailable, a **procurement request is initiated**.