

Atal Bihari Vajpayee-Indian Insitute of Information Technology & Management, Gwalior

INDENT

Assets/Consumables

(Please √ as applicable)

			Department / Section	
Name of the person requesting			Date	
Please use.	e issue the following iter	ms to the undersign	ned from the stores v	which are required for officials
S. No.	Items/Description	Quantity Required	Quantity Issued	Remark
1				
3				
4				
5				
Signature of Indenter Name: Name: Store Section: (Available/ Not available) Registrar (Recommended / Not Recommended) Director				
Store	:			
	ved above mentioned ite items is as mentioned a	• •	ification in our inde	ent and certified that the quantity
Issued by Signature			Received by Signature	
Name		Name		