

Department Of Telecommunication  
Information Technology Cell  
(Room No.1412)

Dated: \_\_\_\_\_

**REQUISITION FOR SUPPLY OF COMPUTER CONSUMBLE ITEMS**

1. Name and designation of the Officer : \_\_\_\_\_  
(In Block Capital)
2. Phone No. and Room No. of the Officer: \_\_\_\_\_
3. Type of items required and their quantities  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Previous Requisition No. : \_\_\_\_\_
5. Type, Make, Model and DoT IT Number of the equipment(s) for which item are required:  
\_\_\_\_\_  
\_\_\_\_\_
6. Name and designation of the person authorised by the officer to receive the aforesaid items: \_\_\_\_\_
7. Signature of Authorised person \_\_\_\_\_

Signature of the officer with official stamp

To  
**Store Incharge (IT, Cell)**

**RECEIPT**

1. Signature \_\_\_\_\_
2. Name and designation with I. Card No. : \_\_\_\_\_
3. Date: \_\_\_\_\_