

STOCK RELEASE ORDER

Warehouse Location TH01

Date _____
To IDN _____
From TH01 _____

Designation _____
Designation _____

Destination City/Port _____
Destination Country INDONESIA

Incident Name _____

Attached: ☐ SASOP FORM 5
☐ Other Document

Delivery Date 11/6/2020 12:00:00 AM

No	Item Code	Item Description	Quantity	Unit	Unit Price \$	Total Price \$	FundSrc
10000	PHK	Personal Hygiene Kit	4	PCS	80.00	320.00	ER-1805
20000	PHK	Personal Hygiene Kit	4	PCS	0.00	0.00	ER-1805
Attack additional sheets if accessory					TOTAL VALUE	320.00	

TOTAL VALUE IN WORDS

**** THREE HUNDRED TWENTY AND 0/100 DOLLARS

CONSIGNE INFORMATION

Name of NDMO: _____
Contact Person: _____
Designation: _____
Email: _____
Office Tel. No.: _____
Mobile No.: _____

Approved by _____
Director of Operations Team
Leader

Date

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