

Application Form A

Staff Devices Offer Requisition Form

NAME: NATHA	N MOON	ු GN No.	198	
Position: CORE	NETWORK E	KPERT Station	LUSAKA	
Device type:/tu	AWE! Y3	••••••••		
Amount: K800=				
Total: K1,600	=00			
Signature: Name Date: 13/02/2019				
HR Approval				
Approved by:Designation				
Signature:Date://				
	5			
Finance Approval	×			
Approved by:Designation				
Signature:Date:				
For Payroll Use				
Employee Net	Other	Effective Net	Proposed Monthly	Is employee
Salary	Deductions	Salary	Deduction for Device requested	able to
			Dovice requested	anora?
	ž - ž			