

STOCK ISSUE REQUISITION (SIR) FORM

DATE 25 JANUARI 2017
DEPT CSR

No	ITEM CODE	PART NO	DESCRIPTION	UOM	QTY REQ	QTY ISSUED
1			amlodipin 5 mg	box	1	
2			amlodipin 10 mg	box	2	
3			captopril 12.5 mg	box	1	
4			Captopril 25 mg	box	2	
5			elkana	box	1	
6			omeprazole	box	2	
7			ABH combi	box	5	
8			Sangobion	strip	5	
9			molakrim	ube	5	
10						
11						
12						
13						
14						
15						

REMARKS

Requested By

[Signature]

Originator / Name :

Date : 25-01-17

Authorized By

[Signature]

Dept. Manager/Supt / Name :

Date : 25/01/2017

Received By

[Signature]

Signature / Name :

Date : 25-01-17