



DIFFERENT TYPES OF FORMS

Correctness of the entry of different forms used in electrical work is necessary to acquire right, complete, and accurate number of materials and tools needed in a specific electrical job. Here are samples of different forms used in electrical work.

1. **Purchase requisition** is a document generated by a user department or storeroom personnel to notify the purchasing department items it needs to order, their quantity, and the timeframe. It may also contain the authorization to proceed with the purchase. This is also called ***purchase request*** or ***requisition***.

REQUISITION SLIP FORM					
Name:					
Project:					
Location:					
Classification: Purpose:					
NO.	QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
REQUISITIONER			TEACHER	HEAD	PRINCIPAL

Example of Purchase Requisition Slip Form

		REPUBLIC OF THE PHILIPPINES <i>Department of Education</i> REGION V DIVISION OF CAMARINES SUR STA. LUTGARDA NATIONAL HIGH SCHOOL New Poblacion, Cabusao, Camarines Sur			
REQUISITION SLIP FORM					
Name: JORDAN D. GARRADO					
Project: INSTALLATION OF 2 BULB IN PARALLEL CONNECTION CONTROLLED IN DIFFERENT LOCATION USING TWO (2) SINGLE POLE SWITCH					
Location: STA. LUTGARDA NATIONAL HIGH SCHOOL					
NO.	QUANTITY	UNIT	DESCRIPTION	UNIT COST	TOTAL COST
1	2	Pcs.	Incandescent bulb 12W	125	250
2	2	pcs	Junction box	55	110
3	2	Pcs	Utility box	65	130
4	2	pcs	Single pole switch (Flush type)	105	210
5	24	meters	Duplex wire 14 AWG	35	840
					1,540.00
REQUISITIONER			TEACHER	HEAD	PRINCIPAL

2. **Inventories** are raw materials, work-in-process goods and finished goods that are considered to be the portion of a business's assets that are ready or will be ready for sale. Inventory represents one of the most important assets that most businesses possess, because the turnover of inventory represents one of the primary sources of revenue generation and subsequent earnings for the company's shareholders/owners.

INVENTORY OF MATERIALS FORM						
Name:						
Section:						
School:						
Shop lab.:						
Purpose:						
Tools/ Equipment	Qty.	No. of Functional	No. of not Functional but Repairable	No. of Condemn- able	No. of Borrowed	No. of Missing
REQUISITIONER			TEACHER	HEAD	PRINCIPAL	
Date: _____						



Name: MARK DE LA CRUZ
Section: GRADE 7 – AMETHYST
School: STA. LUTAGARDA NATIONALHIGH SCHOOL
Shop lab.: EIM SHOP
Purpose: MONITOR THE NUMBER OF TOOLS NEED TO REPAIR.

Tools/ Equipment	Qty.	No. of Functional	No. of not Functional but Repairable	No. of Condemn- able	No. of Borrowed	No. of Missing
CLAW HAMMER	10	7	2	1	0	0
MULTIMETER	5	5	0	0	0	0
LONG NOSE PLIERS	6	5	0	0	0	1
ELECTRIC DRILL	3	2	1	0	0	0
PHILLIPS SCREW DRIVER	6	4	1	1	0	0
WRENCH	6	4	1	0	1	0
TOTAL	36	27	5	2	1	1

REQUISITIONER

TEACHER

HEAD

PRINCIPAL

Date: _____

3. **Job order or Work Order form** is a written instruction to perform a work according to specified requirements, within specified timeframe and cost estimates.

COMPANY NAME/LOGO		ELECTRICAL Work Order/Invoice			
123 Company Street City, ST 12345 Phone #'s www.website.com					
TO:		DATE OF ORDER HOME TEL.			
		ORDER TAKEN BY WORK TEL.			
		STARTING DATE <input type="checkbox"/> DAYWORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA			
		JOB NAME / NO.			
		JOB LOCATION			
		INVOICE DATE JOB TEL.			
CHECKMARKS DENOTE: <input type="checkbox"/> WORK TO BE DONE <input type="checkbox"/> WORK PERFORMED	INSTALL REPAIR REPLACE INSPECT TROUBLESHOOT ROUGH WIRE FINISH WIRE	TERMS:			
		DESCRIPTION OF WORK			
TEMPORARY SERVICE					
LIGHT FIXTURE(S)					
SWITCH(ES)					
RECEPTACLE(S)					
RECEPTACLE(S) GFCI					
SERVICE PANEL		LABOR	HRS.	RATE	AMOUNT
SUB-PANEL					
CIRCUIT BREAKER(S)					
FUSE(S)					
ANTENNA WIRE					
CABLE T.V. WIRE					
TELEPHONE WIRE					
SMOKE DETECTOR(S)		TOTAL LABOR			
DOOR CHIME(S)		QTY.	MATERIAL	UNIT	AMOUNT
CEILING FAN(S)					
BATHROOM FAN / LIGHT					
BASEBOARD HEATER(S)					
FAN DRIVEN HEATER(S)					
RADIANT PANEL(S)					
RANGE					
RANGE HOOD					
DISHWASHER					
DISPOSAL					
WASHER					
DRYER					
WATER HEATER					
WELL / SUMP PUMP					
HOT TUB / SPA					
POOL LIGHT(S)					
POOL PUMP					
AIR CONDITIONER(S)					
BOILER / FURNACE					
HEAT PUMP					
GENERATOR					
KITCHEN		WORK ORDERED BY		TOTAL MATERIALS	
DINING ROOM		I hereby acknowledge the satisfactory completion of the above described work.		TOTAL LABOR	
LIVING / FAMILY ROOM		X	SIGNATURE	TAX	
BEDROOM #1 #2			DATE	OTHER CHARGES	
BEDROOM #3 #4				TOTAL	
BATHROOM #1 #2					
BASEMENT					
GARAGE					
NEW ADDITION					

Reorder From www.windyctyforms.com Order # XXXX
PRINTED IN U.S.A.

Thank You!

4. **BORROWER'S FORM** is a form used to request for tools and equipment needed for a particular job. It indicates the department that the borrower is connected, the date, the job that is to be done, who is the person to approve the request, when it was returned and if it was in good condition.

(Revised 31August2010; Accomplish in duplicate)

MR / MS _____

CONTACT NO. E-MAIL ADDRESS:

Please check:

☐ Dept.

REPS/Staff Department College:

☐ Others _____ Office Address _____

Accompanying DGE-TCAGP Member: _____

PURPOSE: _____

INTENDED PERIOD OF USE: _____ to _____ LOCATION: _____

CHECKLIST OF REQUESTED ITEMS *

* If more than 8 items, provide another attachment.

**** Do not fill this part; to be countersigned by authorized staff upon receipt and return.**

RECOMMENDING APPROVAL (for DGE students): _____ Thesis
Adviser/Faculty-in-Charge)

Borrower's Name in Print and Signature _____ This is to certify that: _____

Date: _____ 1. I have read, understood, and agreed to the
"Terms of (Fill this portion only during the time of borrowing.) Use for AG&ST Equipment" (back of
this page).

2. I received the above listed equipment(s) completely and

APPROVED: _____ in good order.

_____ 3 JR.. I swear to use the above listed
equipment(s) with due

JUAN DELA CRUZ JR., Dr. Eng. care and diligence.

AG&ST Lab Coordinator
repair or replacement:

4. In case of damage or loss, I shall be responsible for

APPROVED:

JUAN DELA CRUZ JR., Dr. Eng. (Borrower's Name over printed name) Chair, DGE
and Director, TCAGP

To be accomplished upon return of equipment

Date returned: _____

All items in good condition? ☐ YES ☐ NO, (If no, please attach damage report)

Any missing item? YES NO. Please describe:

Received by: _____