Form	No	.24
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DIRECTOR

		STORE INDE	:NT		Date:	
	(For Cl	nemicals / Glasswares / Plasticwa		te Contract)		
Inde	nt No	Laboratory				
	Source of Fund: Institute	/ Project (RP/IND	_/Contingenc	y (PhD/NPDF_)	
Sr.	Particulars	Manufacturer & Catalogue		intity	Remarks	
No.		No.	In Stock	Required		
Char	nical Coordinator / Lab. Coordin	ator		Signaturo	of Indonting Officer	
Chemical Coordinator / Lab. Coordinator			Signature of Indenting Officer			
Designation:						
FOR OFFICE USE ONLY						
				_		
				<u>A</u>	pproved / Not-Approved	

CFAO

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