# Request for Sell of Consumables/Supplies

*(Fax to 5153, Attn: Director of Plant Services)*

Date: ______________________________________________

Budget Unit Head: ________________________________

Account Number: ________________________________

Contact Information

Name: __________________________________________

Signature: ______________________________________

Phone #: ________________________________

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<tr>
<th>Specify complete description of consumables/supplies</th>
<th>Quantity</th>
<th>Estimated Value</th>
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