Request to Add/Remove Stock

Item Description -

Manufacturer’s Part Number or Specification #*

Estimated Monthly Usage* __________ Initial Order quantity* ____________

Justification for Stocking/Removing

____________________________________________________________

Warehouse Location requirements

10  50  Other - Explain

Requested by ___________________________ Print ___________________________ Sign

Approved by (dept Manager or Supervisor)

______________________________________________________

Warehousing Approval

FAMIS Item #

__________________________

Part number description

__________________________

Min __________

Max __________

FAMIS Unit of Measure ____________

Approved by

_________________________ Print ___________________________ Sign

Entered by

_________________________ Print ___________________________ Sign

*Mandatory Field