

Komar University of Science and Technology Laboratories Unit

Chemical/Consumable Item Use Form

Requester's Name:		Departmen	Department:	
Phone Number:		Date:		
No.	Item Name	Quantity	Purpose/Note	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
·				
Reques	ster's Name and Signature	Lab Membe	Lab Member's Name and Signature	