



NATIONAL HIGHWAY AUTHORITY

(MIS SECTION)

DEMAND FORM FOR TONER CARTRIDGE

Printer Set# _____ Demand# _____
(To be filled by MIS)

Make/Model # _____ Serial#: _____

Name of Section: _____ Date: _____

Toner Model	Quantity Demanded	Quantity Issued	Toner Set Number	Last toner Issuance date <i>(to be filled by MIS Section)</i>

User Name: {
 Signature: _____
 Name: _____
 Designation: _____

Recommendation of Section Head: _____

Sign/Stamp: _____

Approved / Not Approved _____

(Signature of AD/Supdt. (MIS) NHA, HQ.)

Issued By:

Received By:

Signature: _____ Signature: _____

Name: _____ Name: _____

Designation: _____ Designation: _____

Date: _____ Date: _____