
	Reference No.: BatStateU-FO-SFA-04	Effectivity Date: November 17, 2017	Revision No.: 01
<b>REQUISITION SLIP</b>			
Name of Requesting Personnel/Student:			
Department/College/Office:			
Please check:			
<input type="checkbox"/> GPB Main Campus I <input type="checkbox"/> GPB Main Campus II <input type="checkbox"/> Nasugbu Campus <input type="checkbox"/> Malvar Campus <input type="checkbox"/> Balayan Campus <input type="checkbox"/> Lemery Campus <input type="checkbox"/> Lipa Campus <input type="checkbox"/> Rosario Campus <input type="checkbox"/> San Juan Campus <input type="checkbox"/> Lobo Campus			
Document/s requested: 1. _____ 2. _____			
Purpose of Request:			
Date Requested:		Date Released:	
_____ Signature over Printed Name			

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