

## **REQUISITION ORDER FORM**

\* Should be register by Logistic Personnel GAM Order No. : Date Raised: 27/03/2023 **VENDOR INFORMATION** \* if recommended by requestor \* Please tick √ the relevant box. **AIRCRAFT DETAILS** \* if requisition related to specific aircraft A/C Reg. : Name of Company : **PRIORITY** ORDER TYPE N/A Owner : ALL BASE & Address **X** Purchase A/C Type : N/A AOG Repair Location : TOOLSTORE A/C Status : Rush Order Standard Exc. Overhaul N/A Worksheet: N/A Contact No. Others Routine Order **Email Address** \* Please state ( N/A ) if not applicable. **REQUESTOR DETAILS** 2. Position 3. Dept. 4. Base 1. Name TOOL STORE SUPERVISOR **TOOL STORE** MIAT MOHD FADZLIE ADAM 5. Contact No. 6. Email Address 7. Delivery Location 8. Remarks (if any) **GAM STORE** 0173989835 fadzlieadam@galaxyaerospace.my **DETAILS OF REQUISITION USE BY REQUESTOR USE BY LOGISTICS DEPT.** Part No. Serial No. Reference P.O No. P.O Date EDD Price (RM) No. Description Qty Remarks 19MM SOCKET 3/8" SQ 1. KEN5825370K N/A 1 UNIT 76-712NF SPARE NYLON THO5290337C 4 UNIT N/A FACE 38MM **Special Instruction:** Item requested by Toolstore MIAT. Please specify specifications/justifications/reason for the above request if required (attach separate sheet if space not sufficient)