

# **INDENT FORM**

## **Department of Electrical and Electronics Engineering**

Form No. : \_\_\_\_\_

Date: \_\_\_\_\_

Name of the indenter : \_\_\_\_\_

Purpose : \_\_\_\_\_

Amount : \_\_\_\_\_

Whether reimbursement or advance? : \_\_\_\_\_

Notes : \_\_\_\_\_

Signature of the indenter

Approved / Not Approved

\_\_\_\_\_

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