## **Stock Request Form**

Section II. To be completed by Inventory Control Staff

Instructions: Review the submitted request. Meet with

requester to review the request and your proposed stock plans. When completed, sign and file the document and

## Section I. To be completed by Requester

Instructions: Complete and sign the section below. Have a Sales Manager sign below. Then submit the completed form to Inventory Control Manager.

										schedule the first quarterly review.								
Unit								th Forecast		Initial Inventory Stock Plan Parameters								
Part Number Sales Price		2nd month	3rd month	2nd quarter	3rd quarter	4th quarter	Total Qty	Total \$Sales		Unit Cost	\$ACOGS	Lead Time	Purch Class	Method	MIN/OP	MAX/OQ	SSD	
									l									
	Total	Foreca	sted <i>A</i>	\ \nnual	lized S	Sales:				Notes:								
Requested for:						•												
Customer Name / Location																		
Risk Assessment																		
YES NO																		
	l	ممامم	~£ ~			عالمميا												
☐ ☐ Will the sales of these items	-				-	kea it	ems?											
☐ ☐ Will customer commit to a st	tock lial	oility a	ıgreer	nent?														
☐ ☐ Will the customer provide re	gular us	sage f	orecas	sts fo	r thes	e item	s?											
☐ ☐ Will the customer place sche	duled p	urcha	se or	ders f	or the	se iter	ns?											
. □ Will the customer place a bla	-																	
Comments:	ince pe	ar crias	014	C1 101	tilest	, recinio	,											
Requested by:		Appr	oved b	by Sal	es Ma	nager:				Invento	ry Plan A	nalysis	/Imple	mentatio	n Comp	leted by:		
Print		Print								Print								
										•••								
Sign		Sign								Sign								
Date		Date								Date								