



USHA FIRE SAFETY EQUIPMENTS PVT LTD.,

Life And Property Saving Since 1988

SAMPLE RETURN FORM

Company Name :

Date:

S.No.	ITEM DESCRIPTION	Qty.	(to be filled by Stores Department) D / P / M

DC Number :

Declaration by the Stores Dept.

The above material has been received by Mr. of stores department .

**Stores In charge
Seal & Signature**

BDD Signature

* P - Perfect / D - Damage / M - Missing