

Monthly Paperwork/Supply Requisition

ATTENTION: Joet@tuxedojunction.com

To be sent in **FIRST MONDAY** of each month



2/24

Store	Date	Associate Name

PAPER FORMS	STORE SUPPLIES	SEWING SUPPLIES
<input type="checkbox"/> Adjustment Card <input type="checkbox"/> Alteration/Appointment Cards <input type="checkbox"/> April 1st Sheets <input type="checkbox"/> Be Considerate MONDAY Cards <input type="checkbox"/> Be Considerate SATURDAY Cards <input type="checkbox"/> Be Considerate SUNDAY Cards <input type="checkbox"/> Copy Paper (8 1/2 x 11) <input type="checkbox"/> Damage Tag Forms <input type="checkbox"/> Deposit Slips (Bank Name) _____ <input type="checkbox"/> Deposit Bags <input type="checkbox"/> Figure Book Sheets <input type="checkbox"/> Groom Tags <input type="checkbox"/> Projection Sheets <input type="checkbox"/> Quick Forms <input type="checkbox"/> My Wedding Planner Flyers <input type="checkbox"/> Retail Planners <input type="checkbox"/> Retail Transfer Forms <input type="checkbox"/> Second Fitting Notices <input type="checkbox"/> Wedding Planners <input type="checkbox"/> WinTux Register Tape	<input type="checkbox"/> Audit Hanging Bags <input type="checkbox"/> Clear Roll Plastic (plain) <input type="checkbox"/> Clorax Wipes <input type="checkbox"/> Crystals for Iron Bottle <input type="checkbox"/> Disposable Socks <input type="checkbox"/> Garbage Bags <input type="checkbox"/> Hand Soap <input type="checkbox"/> Lysol Spray <input type="checkbox"/> Pant Tags <input type="checkbox"/> Paper Clips <input type="checkbox"/> Paper Towels <input type="checkbox"/> Pens <input type="checkbox"/> Scotch Tape <input type="checkbox"/> Small Retail Sale Bags <input type="checkbox"/> Staples <input type="checkbox"/> Toilet Bowl Cleaner <input type="checkbox"/> Toilet Paper <input type="checkbox"/> Vacuum- Bags Size _____ <input type="checkbox"/> Vacuum- Belt # _____ <input type="checkbox"/> Wedding Planner Plastics <input type="checkbox"/> Window Cleaner <input type="checkbox"/> White Out <input type="checkbox"/> Yellow Transer Bags	<input type="checkbox"/> Blind Stich Needles- Size _____ <input type="checkbox"/> Marking Chalk <input type="checkbox"/> Sewing Needles <input type="checkbox"/> Thread for hand sewing <input type="checkbox"/> Black <input type="checkbox"/> Grey <input type="checkbox"/> White <input type="checkbox"/> Thread for blindstitch machine sewing <input type="checkbox"/> Black <input type="checkbox"/> Grey <input type="checkbox"/> White

PRINTER CARTRIDGE

Style Number _____ How many needed? _____

LIGHTS

Number on Bulbs	Watts	Number Prongs	Quantity

MISCELLANEOUS or any item you do not see on any Supply Requisition Sheet ...

***Keep a copy for your records**