

**ICMR- National Institute of Epidemiology, T.N.H.B.
Ayapakkam, Chennai 77**

Request for Tea/Coffee/Snacks from NIE Canteen

Date:

Name of the Project/Plan		
1.	Requested by (Name & Designation) :	
2.	Tea /Coffee /Snacks required for official meeting on_____ & Time_____AM/PM	1. No. of Tea_____ 2. No. of Coffee_____ 3. No. of Snacks_____
3.	Signature (Scientists/PIs/HoD)	
4.	Administrative Officer	

Note: Prior submission of request, one day in advance is appreciated.