**STATIONERY ORDER FORM**

Please complete your personal details and tick the item(s) required. Post or fax the form to the Payroll Bureau and we will send you the stationery you require within 5 working days.

**PERSONAL DETAILS**

Employer’s name: Comp/Code \*

This is the letter and number at the top right-hand corner of your timesheets e.g. 637 B.

🞏 Timesheets

🞏 Timesheet Summary

🞏 Employee Starter Forms

🞏 Missing details / Amendment Form

🞏 Personal Assistant Leaver’s Form

🞏 Stationery Order Form

Signed (Employer): Date:

|  |
| --- |
| **PAYROLL BUREAU USE ONLY** |
| Forms sent: | Date sent: |
|  |  |
|  |  |