

UNIVERSITY OF RUHUNA - MATARA PURCHASE REQUISITION FORM

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

E-mail: sabs@admin.ruh.ac.lk
Web: http://www.ruh.ac.lk

Form No-REQ009	
Date-2024-05-24	

To be Completed in triplicate

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User	Faculty/Admin Department/Branch Contact Person Telephone No	jhbjh DEIE ihju 56							
	Fund GOSL Yes		Project]	Vote			
Funds		ocation 56213			If No, Vice Chancellor's Approval required Approved Vice Chancellor				
Object	Description of the item/it indented to be purchase	d	Qty Required	Qty Available	Qty Supplied	Rate	Total value		
	bhjb Specification is Attached	511 Yes No	451	56					
Purpose	Normal If Urgent Provide The	Fast Track Justification:	Urgent						
	Prepared By:				Head Of The Department:				
Approval	Recommended/Approved Date				Dean/Registrar/Bursar				
	Approved Date	Registrar		Date		ce Chancello	or		
Office Use	Please take action to Date	Supply			Assistant Bur	sar (Supplies	s)		