

## UNIVERSITY OF RUHUNA - MATARA **PURCHASE REQUISITION FORM**

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

E-mail: sabs@admin.ruh.ac.lk

Form No-REQ366	
Date-	Ī

0000	Web: http://www.ruh.ac.lk	To be Completed in triplicate						
User	Faculty/Admin Department/Branch Contact Person Telephone No							
	Fund GOSL Yes		Project			Vote		
Funds	Whether the item/items requested Included Procurement Plan Yes: No:  Budget Allocation Used Amount Balance Available				If No, Vice Chancellor's Approval required  Approved  Vice Chancellor			
Object	Description of the item/items indented to be purchased	Cost	Qty Required	Qty Available	Qty Supplied	Rate	Total value	
Purpose	Normal Fas If Urgent Provide The Just	t Track  ification:	Urgent					
Approval	Prepared By:  Recommended/Approved  Date  Approved  Date  Registrar  Date				Head Of The Department:  Dean/Registrar/Bursar  Vice Chancellor			
Office Use	Please take action to Suppose Date				Assistant Bur			

• When Specifications are not provided University Specifications may be used without giving any notice.