

## UNIVERSITY OF RUHUNA - MATARA PURCHASE REQUISITION FORM

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ003	
Date-	

විශුවර	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		Budget Allocation  Jsed Amount			If No, Vice Chancellor's Approval required  Approved  Vice Chancellor			
Object	Description of the item/items indented to be purchased	Qty Required	Qty Available	Qty Supplied	Rate	Total value		
	Specification is Attached Yes No	)						
Purpose	Normal Fast Track If Urgent Provide The Justification:	] Urgent						
	Prepared By: Head Of The Department:							
Approval	Recommended/Approved Date			Dean/Registrar/Bursar				
	Approved Date Registrar		Date	Vi	ce Chancello	or		
Office Use	Please take action to Supply Date			Assistant Bur	sar (Supplies	s)		

<sup>•</sup> Incompleted forms will be rejected • When Specifications are not provided University Specifications may be used without giving any notice.