

## UNIVERSITY OF RUHUNA - MATARA PURCHASE REQUISITION FORM

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ018

Date-

විශුවේ	Veb: 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	
	Specification is Attached Yes	No						
Purpose	Normal  Fast T If Urgent Provide The Justific	rack  ation:	Urgent					
	Prepared By:				Head Of The Department:			
Approval	Recommended/Approved Date				Dean/Registrar/Bursar			
	Approved Date Registrar Date			Date	Vice Chancellor			
Office Use	Please take action to Supply Date				Assistant Bur	sar (Supplies)	)	

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