

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

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ006	
Date-	

	vveb: http://www.run.ac.ik	To be Completed in triplicate							
User	Department/Branch Contact Person	FOE DEIE ghg 2044							
	Fund GOSL Yes			Project]	Vote		
Funds	Whether the item/items requested Included Procurement Plan Yes: No: Sound Soun					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	
	Chair	50	00000	200	12]
	jhg		5000	12	23]
	ghjgj		600	25	30				
	Specification is Attached	Yes T	□ No						
Purpose	Normal If Urgent Provide The	Fast To Justific	rack ation:	Urgent					
	Prepared By:					Head Of The Department:			
Approval	Recommended/Appro Date	Recommended/Approved Date				Dean/Registrar/Bursar			
	Approved Date	Registrar			Date	Vice Chancellor			
Office Use	Please take action to Date	Please take action to Supply Date				Assistant Bursar (Supplies)			

[•] Incompleted forms will be rejected • When Specifications are not provided University Specifications may be used without giving any notice.