

## 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-REQ004	
Date-2024-04-24	

## To be Completed in triplicate

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User	Faculty/Admin Department/Branch Contact Person Telephone No	FOE  MENA  Nisal  0763983655						
	Fund GOSL Yes		Project		]	Vote		
Funds		Yes: No: 40000			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	
	Specification is Attached	Yes No						
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 (Supplie	s)	