

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-REQ020	
Date-2024-06-26	

To be Completed in triplicate

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User	Faculty/Admin Department/Branch Contact Person Telephone No	fgd DEIE ddf 04522855						
	Fund GOSL Yes		Project]	Vote		
Funds		on ₀₅₅			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	
	drg Specification is Attached	65 Yes No	66	6666666				
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)	