

UNIVERSITY OF RUHUNA - MATARA PURCHASE REQUISITION FORM

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ040	
Date-	

විශුවේ	Web: http://www.ruh.ac.lk	To be Completed in triplicate								
User	Faculty/Admin Department/Branch Contact Person Telephone No	rtg DEIE tgrg 2542								
	Fund GOSL Yes			Project			Vote			
Funds		ems requested Included Yes: No: 5000000				If No, Vice Chancellor's Approval required Approved Vice Chancellor				
Object	Description of the item/it indented to be purchase		Cost	Qty Required	Qty Available	Qty Supplied	Rate	Total value		
	Specification is Attached	Yes [No							
Purpose	Normal If Urgent Provide The	Fast T e Justific	rack cation:	Urgent						
	Prepared By: He Recommended/Approved					Head Of The	Head Of The Department:			
Approval	Date Approved Date Registrar Date				Dean/Registrar/Bursar Vice Chancellor					
Office Use	Please take action to Date	Supply	,			Assistant Bur	sar (Supplies))		

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