

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

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ047	
Date-	Ī

<u> </u>	vveb: http://www.run.ac.ik				To be Con	npietea in trij	olicate 		
User	Faculty/Admin Department/Branch Contact Person Telephone No	ds DEIE							
	Fund GOSL Yes		Project			Vote			
Funds	Whether the item/ite Procurement Plan Budget Allocation Used Amount Balance Available	ms requested Inclue Yes: No: 50000000	If No, Vice Chancellor's Approval required Approved Vice Chancellor						
Object	Description of the item/ii indented to be purchase		Qty Required	Qty Available	Qty Supplied	Rate	Total value]	
	ds Specification is Attached	5 Yes	25	20					
Purpose	Normal If Urgent Provide The	Fast Track Fast Track E Justification:	Urgent						
	Prepared By: Head Of The De					Department:	 :		
Approval	Recommended/Approved				Dean/Registrar/Bursar				
	Approved Date Registrar			Date	Vice Chancellor				
Office Use	Please take action to Date	o Supply			Assistant Bur	sar (Supplies	s)		

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