

## UNIVERSITY OF RUHUNA - MATARA PURCHASE REQUISITION FORM

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ031	
Date-	

විශුවර	Web: http://www.ruh.ac.lk	To be Completed in triplicate							
User	Faculty/Admin Department/Branch Contact Person Telephone No	hhj  DEIE  hhjjh  123456790							
	Fund GOSL Yes		Project		]	Vote			
Funds		ems requested Included Yes: No:			If No, Vice Chancellor's Approval required  Approved  Vice Chancellor				
Object	Description of the item/it indented to be purchase	tems Cost	Qty Required	Qty Available	Qty Supplied	Rate	Total value		
	Specification is Attached	Yes No							
Purpose	Normal	Fast Track   e Justification:	Urgent						
	Prepared By: Recommended/Approved				Head Of The Department:				
Approval	Date Approved Date	Registrar		Date	Dean/Registr	ar/Bursar ce Chancello	or		
Office Use	Please take action to Date	o Supply			Assistant Bur	sar (Supplies	s)		

<sup>•</sup> Incompleted forms will be rejected • When Specifications are not provided University Specifications may be used without giving any notice.