

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-REQ005	
Date-2024-06-11	

To be Completed in triplicate

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User	Faculty/Admin Department/Branch Contact Person Telephone No	FOE DEIE hgjg 0458822255						
	Fund GOSL Yes		Project]	Vote		
Funds		3500000			If No, Vice Chancellor's Approval required Approved Vice Chancellor			
Object	Description of the item/ite indented to be purchased		Qty Required	Qty Available	Qty Supplied	Rate	Total value	
	Chair Specification is Attached	Yes No	<u> </u>					
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)	

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