



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

Date:

2024-03-22

Form No:

REQ005

### User

Faculty/Admin

hhhg

Department/Branch

juuu

Contact Person

yyjh

Contact Number

078555

### Funds

Budget Allocation Rs

500000

Used Amount So far Rs

55000

Balance Available Rs

20000

### Object

				To be filled by Supplies Division		
Description of the items indented to be purchased	Cost Approximately	Qty Required	Qty Already available	Qty Supplied	Rate	Total value
hyyh	5555	22	20			

### Purpose

Normal

### Submission

Send To

registrar

# Approval

**FACULTY/ADMIN**

Prepared By \_\_\_\_\_

Head of the Department \_\_\_\_\_

**RECOMMENDED/APPROVED**

Date \_\_\_\_\_

Dean/Registrar/Bursar \_\_\_\_\_

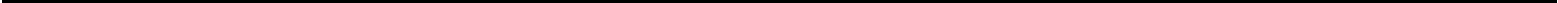
**FACULTY/ADMIN**

Date \_\_\_\_\_

Registrar \_\_\_\_\_

Date \_\_\_\_\_

Vice Chancellor \_\_\_\_\_



## Office Use

**PLEASE TAKE ACTION TO SUPPLY**

Date \_\_\_\_\_

Assistant Bursar(Supplies) \_\_\_\_\_