

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

Supplies Branch

Tel: Extension 2115 Fax 041 2227027

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

Form No-REQ052	
Date-	

0900	Web: http://www.ruh.ac.lk	To be Completed in triplicate								
User	Faculty/Admin Department/Branch Contact Person Telephone No	sdf DEIE dcf 343								
	Fund GOSL Yes		Project]	Vote				
Funds		at Allocation 5000000			If No, Vice Chancellor's Approval required Approved Vice Chancellor					
Object	Description of the item/i indented to be purchase		Qty Required	Qty Available	Qty Supplied	Rate	Total value			
	vf Specification is Attached	fs Yes	33	55				J		
Purpose	Normal If Urgent Provide Th	Fast Track e Justification:	Urgent							
	Prepared By:				Head Of The Department:					
Approval	Recommended/Approved Date Approved				Dean/Registrar/Bursar					
	Date	Registrar		Date	Vi	ce Chancell	or			
Office Use	Please take action to Date					Assistant Bursar (Supplies)				