



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-

Date -

To be Completed in triplicate

User	Faculty/Admin						
	Department/Branch						
	Contact Person -		Telephone No -				
Funds	Funds GOSL Yes <input type="checkbox"/> Project		Vote				
	Whether the item/items requested Included in procurement Plan		* If No should get the Vice Chancellor's Approval				
	Yes <input type="checkbox"/> NO <input type="checkbox"/>						
	Budged Allocation Rs.		Approved				
	Used Amount So far Rs.		Vice Chancellor				
	Balance Available Rs.						
Object					Should be filled by Supplies Division		
	Description of the item/items indented to be purchased	Cost (Approximately)	Qty. Required	Qty. Already Available	Qty. Supplied	Rate	Total value
	• Specification is Attached Yes <input type="checkbox"/> No <input type="checkbox"/>						
Purpose	Normal <input type="checkbox"/> Fast Track <input type="checkbox"/> Urgent <input type="checkbox"/> If Urgent Provide The Justification :						
Approval	Prepared By -		Head Of The Department -				
	Recommended/Approved						
	Date		Dean/Registrar/Bursar				
	Approved						
	Date	Registrar	Date	Vice Chancellor			
Office Use	Please take action to Supply Date Assistant Bursar (Supplies)						

◆ Incompleted forms will be rejected.

• When Specifications are not provided University Specifications may be used without giving any notice.