***Sylhet Women’s Medical College***

**For the Department of**: Community Medicine Date: 04.12.2019

***Requirement Form***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.N | Present Purchase | | Pre. Stock | Previous Purchase | | | Remarks |
| Name of item | Qty | Qty | Date | Rate |
| 01 | 2nd prof. examination November, 2019  Total  In word: One thousand five hundred only. | 1,500/=  1,500/= |  |  |  |  | for 2nd prof. Viva examination November, 2019 |

|  |
| --- |
| Applicant Sign |

(Sign & Seal)

Applicant Name: Md. Azizur Rahman Head of the Department

Designation: Junior Executive

***Sylhet Women’s Medical College***

**For the Department of**: Community Medicine Date: 20.07.2019

***Requirement Form***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| S.N | Present Purchase | | Present Stock | Previous Purchase | | | Remarks |
| Name of item | Qty | Qty | Date | Rate |
| 01 | KwiWi Gi UvBjm fv½v |  |  |  |  |  |  |

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| --- |
| Applicant Sign |

(Sign & Seal)

Applicant Name:Md.Azizur Rahman Head of the Department

Designation: Office Executive