**A. Project Code:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. Student Organisation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. Name of Project/Purchase:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D. Purchase Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Quantity** | **Reason for Purchase** | **Cost (S$)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Cost (S$)** | | |  |

**E. Recommended Vendor**

1. **3 Quotations**

|  |  |  |  |
| --- | --- | --- | --- |
| **s/n** | **Item** | **Details** | |
| 1 | Vendors and Schedule of Offers  *(Please enclose details of* ***3 vendor quotations.****)* | **Name of Vendor** | **Offer ($)** |
|  |  |
|  |  |
|  |  |
| 2 | Evaluation Conducted by |  | |
| 3 | Name of Recommended Vendor |  | |
| 4 | Reasons For Recommending Vendor |  | |

1. **Waiver of Quotation**

|  |  |  |  |
| --- | --- | --- | --- |
| **s/n** | **Item** | **Details** | |
| 1 | Vendors and Schedule of Offer | **Name of Vendor** | **Offer ($)** |
|  |  |
| 2 | Reasons For Waiver of Quotation |  | |

**F. Prepared By:**

|  |  |  |
| --- | --- | --- |
|  | |  |
| Signature | |  |
| Name: |  |  |
| Student ID: |  |  |
| Designation: |  |  |
| Date: |  |  |

**G. Approved By:**

*Note: Approval should be sought from the Treasurer and the President. If one of the claimants is either the Treasurer or President, one of the approving authorities can be another member of the Executive Committee other than the claimant.*

**Fund:** OSL Seed Fund/ Income/ Donation \* *please indicate*

**Balance in the above fund as at date of signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | |  |  |  |  |
| Signature | |  |  | Signature |  |
| Name: |  |  | Name: |  |  |
| Student ID: |  |  | Student ID: |  |  |
| Designation: |  |  | Designation: |  |  |
| Date: |  |  | Date: |  |  |

**H) For Purchases $1,000 and Above**

**Approved by Office of Student Life:**

|  |  |  |
| --- | --- | --- |
|  | |  |
| Signature | |  |
| Name: |  |  |
| Designation: |  |  |
| Date: |  |  |