Purchase Requisition Form



| 1. Request from: | | | | | | |
|--|---|-------------------------|-------------|------------------------------|--|--|
| | Name : | ame : Designation: | | | | |
| | | | | Ext.# | | |
| | | ned : dated: | | | | |
| | Capex (tick): | | | ne Quotation by User Deptt.: | | |
| | | • | | | | |
| Specification: | | | | | | |
| • | | escription including ac | cessories: | | | |
| | | | | | | |
| | Reason or justification for request including use and capability: | | | | | |
| | | | | | | |
| | Special Specificati | on: | | | | |
| | Brand: | Series: | | | | |
| | | | | _ Sample/Picture: | | |
| | Quantity: Delivery location: | | | | | |
| | Estimated life: Estimated cost: | | | | | |
| | | | | _Date Needed: | | |
| | | | | | | |
| 2. HODs' Approval: | | | | | | |
| | HOD name: Approved: | | | | | |
| | Signature: dated: | | | | | |
| | | | | | | |
| 3. Budget confirmation (Budget Authorized Deptt.): | | | | | | |
| | Budget section Re | emarks: | | | | |
| | | | | | | |
| | | | | | | |
| | Budget Approved | : Used: _ | | Balance: | | |
| | budget code: | Contact perso | n (Budget): | dated: | | |
| | E-mail: | Ext.# | ‡ | Signature: | | |
| | | | | | | |
| 4. Check availability from Store Deptt.: | | | | | | |
| | Availablility Rema | rks: | | | | |
| | | | | | | |
| | | | | | | |
| | Contact person (S | tore): | _dated: | | | |
| | E-mail: | Ext.# | ‡ | Signature: | | |
| | | | | | | |
| 1 | | | | | | |