

गुजरात केन्द्रीय विश्वविद्यालय CENTRAL UNIVERSITY OF GUJARAT

Sector -29, Gandhinagar – 382 030

Name/Deptt:			Date:			
The Fol	lowing item(s) is/are r	equire to be p	rocured for my officia	al use:		
Sr.No.	Name of Items	Qty. Reqd.	Justification	Qty.	Stock Register Entry	
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
	1	l				
Registı	ar	Signatı	ıre		Signature	
9		_	hairperson/Hod/In-charge		Name of Staff/facult	
1. The	tem(s) mentioned above is	/are available in	the Store. If approved, the	quantity requisit	tioned above may be issu	
	item(s) mentioned above i		in the Store. As the item em(s) from M/s.			

Incharge asstt.