For the use of Supplies Division ONLY					
A	Information				
	All the information requested under 1,2,3,4,5 and 6 in the below table are completed	Yes			
В	Relevant Subject Clerk/s				
Dej	Deputy/ Senior Assistant/ Assistant Bursar/ Supplies Date:				

To	To be filled by the Requesting Faculty/ Department/ Division/ Centre/ etc.				
1	Basic Information				
	Date				
	Administration/ Faculty/ Centre				
	Division/ Department				
	Name of the Self Finance Course/ Research Grant/ Centre/ etc. if				
	Applicable				
2	Description of Requested Item/s (For Toner requests, use FORM A	please).			
	Name of the Item (If more than 1 item, please attach a separate				
	document signed by the Requestor and recommended by the Head of				
	the Department/ Division).				
	Quantity Required				
	Purpose (eg: Exam/ Replacement/ any other, please specify)				
	Whether the requesting Items are equal to your Last Request	Yes/ No			
	If no, please give your Reasons (If given space is not sufficient, please				
	attach a separate document signed by the Requestor and recommended				
	by the Head of the Department/ Division).				
3	Requestor's Details				
	Name of the Requestor				
	Requestor's Contact Information: Mobile No.:				
	Extension:				
	Email Address:				
	Signature of the Requestor				
4	Recommendation				
	Dean/ Librarian/ Registrar,				
	I confirm the details given under number 2 is correct.				
	I recommend the requested item/s mentioned under number 2, for the use of the Faculty/ Division/ Department/				
	Centre/ Programme/ Research.				
	Also, the above requestor is appointed to coordinate this procurement on	my behalf.			
	Head of the Department/ Division/ Date: .				
5	Approval				
	Bursar,				
	I approve the request of item/s mentioned under number 2.				
_	8				
6	Deputy/ Senior Assistant/ Assistant Bursar/ Supplies,				
	Commence the procurement process.				
	Bursar Date:	·			
	Date:				

For the use of Supplies Division ONLY			
C	Stock in Hand		
	Quantity Available in Stock in Hand		
	The item/s requested matches with the last request for the same purpose	Yes/ No	
	Whether needed to Purchase	Yes/ No	
	If the List of Items are attached separately, those that need to Purchase	Item nos.	
	Signature of the Subject Clerk & Date		
Deputy/ Senior Assistant/ Assistant Bursar/ Supplies Date:			