

Goods/ Services requisition form
(nr:.....)

Department/Unit Budget Line Expected delivery date

Is it in the procurement plan? YES NO (If not, please provide explanations here below)

No	GOODS/SERVICE REQUESTED OUTLINE	Total items Requested	Total estimated price	Total approved items

Please attach detailed specifications to this form.

Number of attached pages:

Remark (if any):

Request introduced by:

Name Date Signature Comments

Request approved by: (CBM/ Director of finance)

Name Date Signature Comments

Request introduced to: (procurement)

Name Date Signature Comments