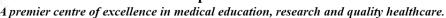


## **Khesar Gyalpo University of Medical Sciences of Bhutan Royal Government of Bhutan**

Thimphu: Bhutan





## Khesar Gyalpo University of Medical Sciences of Bhutan **Requisition Form: Goods**

To, The Procurement Officer Khesar Gyalpo University of Medical Sciences of Bhutan			Date:	Date://	
Kindly arrange to supply the following Items					
Sl.No	Item Description	Specification	Qty	Purpose/Remarks	
Name		Designation		Signature	
Remarks from Administrative/ICT Officer if any:					
			Adm	inistrative/ICT Officer	
App	roved Not Approve	d			
			An	oproving Authority	
N. D. (7.0 -			-		
N.B (If the requirement is for workshop/Seminar, Short term/ad hoc course and project other than the regular activities, the requisition should reach Procurement section at least seven days in advance)					

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