## PURCHASE PROPOSAL REQUEST FORM FOR ITEMS COSTING BELOW RS. 15,000.00 FROM GRANT OF RESPECTIVE CENTER/PROJECT/INSTITUTE

Ind	enter's Name and De	signatic	n (Regular	Staff) :		**************************************	
Pur	chase order Type :No	rmal/R	ate Contract/	Repeat Order, et	Ć, :		
Deta	ails of sanction letter	(if appl	icable), a coj	oy may be attach	ed :	ing	
Bud	get Details for booki	ig expe	nditure :-		T .		
	(a) Name of Proje	ct/ Bud	get Head	gjerennengeneranen	da en estipa e bada apada Peragoka da da	proportion contraction of the co	
	<ul><li>(b) Sub Budget H</li><li>(c) Availability of</li></ul>	2010			62		
S. No.	Complete Description/ Specification of Items/Material	Qty.	Unit Price (Approx.)	Total Amt. (Approx.)	Types of Items/Material (Consumable or Non- consumable)	Purpose and full justification	
1	7						

Signature of Indenter with date

Signature and recommendation of PI/Reporting Officer (As applicable)

Approved/Not Approved

Incharge Regional Centre/Centre Head/Director