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SAMTSE COLLEGE OF EDUCATION



Purchase Sanction Form

Date:

1. Name:

Designation:

2. Details of the items

Sl.No	Particulars	Quantity	Rate	Amount
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
	TOTAL AMOUNT			

- 3. Purpose for which required:
- 4. Approximate amount involved: Nu.....
- 5. Fund from which intended to be purchased:.....
- 6. Amount available in the fund:.....

Signature of the applicant Endorsement by: Deans/Department Head/Program Leader/Section Head: Remarks:

- Forwarded to President for your kind Approval.

- 1. Administrative Officer:
- 2. Finance Officer:

PRESIDENT

Approved/Not Approved