DRATSHANG LHENTSHOG SECRETARIAT

TASHICHODZONG, THIMPHU

DL/Adm/3 Date:

Requisition Form

Sl.No	Name of Item	Specification	Qty	Purpose

1) Requested by **2) Recommended by** **3) Approved by**

Signature:…….

Name:……

Designation:……. Procurement Officer Chief Admin.Officer

Remarks from Accounts Section:…….

…….

Signature…….....