PURCHASE REQUISITION

Company name:

Address:

Tel / email:

SST registration no. (if any):

Requisition no.:

Date:

Project / site:

Department:

Requested by:

Date required:

Approved by:

No.	Description	Qty	Unit	Unit price (RM)	Amount (RM)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
				Subtotal (RM)	
				SST rate (%) - enter rate	
				SST amount (RM)	
				Total (RM)	

Reason for request / notes:

Requested by	**Checked by (head of department)**	**Approved by**
Name / Date	Name / Date	Name / Date

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