

PROCUREMENT REQUISITION*[For Submission to Procurement Management Unit (PMU)]*NAME OF PROCURING ENTITY: **MUHIMBILI UNIVERSITY OF HEALTH AND ALLIED SCIENCES**

Procuring Entity Code No:

Type of Procurement:

Subject of Procurement:

User Department:

Date Required:

Item No.	Description of items <i>[A detailed list, Statement of Requirement/Specifications]</i>	Qty	Unit of measure	Estimate unit cost	Estimated sub total cost
Estimated Total Cost inclusive of taxes (Currency(ies))					

Balance of Fund available for this procurement *[to be filled by finance section]:*

Vote No.	Name of Programme/Project	Item under budget	Balance available
Confirmation of Fund Balance <i>(Head of Finance)</i>	Name:	Position:	Date:

(Any attachments, if applicable, may be attached and must be signed by the appropriate authority)

Signatures are required below to certify submission of request, receipt of request by PMU and authorization to procure by Accounting Officer:

Submission of Request <i>(Head of User Department)</i>	Receipt of Request to Procure <i>(Head of PMU)</i>	Procurement Authorization ¹ <i>(Accounting Officer)</i>
Signature:	Signature:	Signature:
Name:	Name:	Name:
Position:	Position:	Position:
Date:	Date:	Date: