NATIONAL INSTITUTE OF TECHNOLOGY KURUKSHETRA INDENT SLIP B: (For Urgent Purchase of Consumable Items Not available in Store)

Indent No:	:		Date of Indent				
Items Req	uired by Date:						
Name of I	ndentor/s:	Indentor's Mobile No:					
Departmen	nt/School/Section/Cell:		Budget Head (DOC/Other):				
			by Indentor	To be filled by Central Store			
No.	Name of Items Required	Quantity Required	Estimated Cost (Rs.)	Quantity Issued	Actual Cost (Rs.)	Stock Register Page No	
1							
2							
3							
4							
5							
6							
7			<u> </u>				
8							
9			 				
10	m / 1						
	Total		<u> </u>				
1. Certifie	d that the above good/s is/are urgent	ly required for sm	nooth function	ning of the I	Department/Sch	nool/etc.	
2. Justifica	ation of urgent purchase:						
3. It is cert	tified that this is the one time require	ement and no-rect	ırring in natur	re.			
3. Please a	attach the MOP-VII (if the purcha	se of item/repair	work is abo	ve Rs. 2500	00/-).		
	` •	1			,		
Signature	of the Head with Stamp	Indentor's Signature					
U	•					\mathcal{E}	
Account	Section for approval of funds						
	·	r office use of Ac		•			
	Funds of amount Rs.		av	vailable/not	available		
	(Please approve the funds or	n MOP sheet for	estimated co	st exceedin	ng by Rs. 2500	0/-	
AR (Accounts)			Supdt. (Acctt)				
,	,						
Central S	Stores (GeM	report is end	losed herew	rith)			
Faculty I	n-Charge (Stores)	Sundt	Supdt./Assistant (Store)				