

SHOW CAUSE FORM

Project of Title				
Document No.				
Type of Document	Purchases Order	Ten	der L.A of External Provider	
Date				
Details of Document				
Reasons of Document				
Others Unable to Quote			Late Response	
Over Credit Limit			Specialized Supplier	
Others:				
Prepared By:			Approved By:	
(Signature)			(Signature)	
Name: Date:			Name: Date:	

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