



Project of Title	
Document No.	
Type of Document	<input type="checkbox"/> Purchases Order <input type="checkbox"/> Tender <input type="checkbox"/> 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:	
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<div style="text-align: center;">(Signature)</div>		<div style="text-align: center;">(Signature)</div>	
Name: Date:		Name: Date:	