

आय. सी. एम. आर. - राष्ट्रीय प्रजनन एवं बाल स्वास्थ्य अनुसंधान संस्थान
ICMR- National Institute for Research in Reproductive and Child Health
भारतीय आयुर्विज्ञान अनुसंधान परिषद
(Indian Council of Medical Research)
जे. एम. पथ, परेल, मुंबई - 400012
J.M. Street, Parel, Mumbai-400012

REQUISITION SLIP FOR ISSUE OF FOOD ITEMS FROM THE CANTEEN

Please serve Tea & Biscuit/Snacks/Breakfast/Lunch in the _____ (Place)
during the meeting/seminar/visit/event scheduled to be held on
_____ (Date & Time) at ICMR-NIRRH.

Meeting/Seminar/Visitors'/Event Name: - _____

The required items and quantity noted below:

Sr. No.	ITEMS	QUANTITY	TIME
1			
2			
3			
4			
5			
6			
7			
8			
9			

Expenditure to be incurred from (Tick out whichever is applicable):

NIRRH Budget		Extramural Project Budget	ICMR	
			NON-ICMR	

Expenditure to be incurred of Rs. _____ (Approx. Value) from project entitled:

The above meeting/seminar/visit is organized with the approval of Director/Head of Office.

Indenter's Sign: _____

Date: _____

Name of Indenter: _____

Designation: _____

Name of Dept.: _____

Head of Department / P.I.

I certify that funds are available in above mentioned project for procurement of food items.

Section Officer (Accounts)

**Canteen Manager
Vidya Caterers**