

DEMAND NOTE

Name of Institution: **ABVGIET, Pragatinagar Distt. Shimla HP**

Financial Year: **2026-2027**

Name of Lab/Workshop/Section etc.:

Under Head:

S. N.	Name of the store Equipment	Name of the Trade for which item required	Total quantity required as per AICTE Norms	Quantity held at present	Balance quantity required	If not, give reason	Tentative rate per unit (Rs.)	Total Amount (in Rs.)*	Whether included in standard list	Reasons for purchase with justification	Remarks
1											
Total Amount (Rs.)											
GST @ (5, 9, 18 %)											
Total Amount (Rs.)											

* The amount as worked out is approximate and may vary as per the market rate/brand/manufacture or as per prevailing market conditions/change in taxes.

Demanding Official/Officer

Name:

Designation:

Recommending Officer

Approved/Not Approved

Director-cum-Principal
ABVGIET Pragatinagar

Comment of the Purchase Committee: The above mentioned items/machinery/equipment's may be purchased through – Limited tender/Open tender/ through quotation/rate contract.

Sr. No.	Name & Designation	Signature
1.		
2.		
3.		
4.		
5.		
6.		

Approved/Not Approved

Director-cum-Principal
ABVGIET Pragatinagar