



पूर्वोत्तर लोक चिकित्सा संस्थान  
(आयुष मंत्रालय, भारत सरकार के अधीन एक स्वायत्त संस्थान)  
**NORTH EASTERN INSTITUTE OF FOLK  
MEDICINE**



An Autonomous Institute under the Ministry of AYUSH, Government of India)

4/Gem/2021

**PURCHASE OF GOODS AND SERVICES FROM GeM**

**ADMINISTRATIVE AND FINANCIAL APPROVAL FORM**

1.	Department/Wing/Section/Committee	
2.	Name of the Indenter	

**3. Details of the Item**

Sl. No.	Name of the Item	Quantity required	Technical Specification [Gem Product ID (if available)]	Purpose and Justification for Procurement of this item
i				
ii				

4.	Indenter Signature	..... Signature with date
5.	Recommendation of the Accounts Section	..... Signature with date
6.	Administrative and Financial Sanction	..... Director, NEIFM, Pasighat

For Office only:

GEMC - _____
Amount _____
Date _____

PRC date _____
Signature _____