

UNIVERSITY OF NEBRASKA - LINCOLN
Purchasing Card: Transaction Voucher

Requester Information:

Name *(if different than the cardholder)*: _____

Cardholder's Name: _____

Order Information:

Date: _____

Amount: \$ _____

Merchant Name: _____

When ordering via phone:

Contact Name: _____

Phone: _____

Invoice Received via, *check one*: Website (); Email (); Fax (); At Vendor (); With Shipment (); or Mail ()
(recommended)

Packing slip received: Yes () No ()

Description of item(s): *(Items listed and how they relate to the CO/WBS being charged. Specifics in lay terms. Not See Invoice)*

Business Purpose *(required, check one)* :

Supplies (); Resale (); Research/lab (); Instruction (); Marketing/Advertising ();
Employee Development (); Repairs/Maintenance (); Extension/Outreach (); or

Other ():

Accounting Information:

Cost Object: _____

G/L Account: _____

Cardholder Information:

By signing below, as purchaser and cardholder, I affirm that I've authorized this purchase and did not share my card:

Cardholder's Signature: _____

Approval:

Approving Official's Signature

(Business Center Manager)

Date: _____

Additional Dep't or BC Approval

(optional; different than above) : _____

Date: _____

Reconciler Information:

Document Date: _____

Posting Date: SAP _____

Document No. _____

Initials: _____