UNIVERSITY OF NEBRASKA - LINCOLN Purchasing Card Program's Transaction Voucher

Date:	·	
Requester's Name:		
Amount:	\$	
Cardholder's Name:		
Vendor's Name:		
Duciness Dumess		
Business Purpose:		
Description:		_
		•
Item Location:	_	•
Cost Object:		
G/L Account:		
When ordering via phone:		
By signing below, as purch	aser and cardholder, I affirm that I've authorized this purch	ase and did not share my
Cardholder's Signature:		
*********	*********************	*******
Approving Official's Signature:		
*************************	***********************	*********
Reconciler's Use Only:		
Document Date:		
Posting Date:		
SAP Document No.		