

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): *(at a minimum: higher-valued items; specific, lay terms)*

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 *(required here) or "See SAP summary"* () _____ Date: _____

Additional Departmental Approval _____ Date: _____
(optional; different than above) :

Reconciler Information *(recommended)* :

Document Date: _____
Posting Date: _____
SAP Document No. _____