

PURCHASE VOUCHER

Include with each receipt or order / submit for PO assistance.



Date _____

Purchaser / Person Requesting Order _____

Procard Holder (if applicable) _____

Vendor _____

Amount _____ (attach a valid quote, if applicable)

Account Number(s)/SIO: _____

Description of Items/Service:

If food is purchased, also include:

- Itemized receipt
- List of attendees
- Agenda

Detailed Business Purpose

If charging to a grant, specify how the item(s)/service support the project.

Pre-Authorization

Required for Procard Purchases > \$1,000 or PO/PRD > \$10,000

Chair (or Delegate) Signature Date

For Business Office Use

PO # _____

PRD # _____