UNB
EST. 1785
UNIVERSITY OF NEW BRUNSWICK

Print

UNB Saint John Campus Store Voucher

Please see Campus Store Purchase Policy for eligible items and process

Date: _____

Item(s) Requested: _____

Purpose of Item requested (e.g., how does this purchase support the University's Mission?)

_____

Estimated cost ($): _____

Requested By (Please print): _____

Department: _____ Employee ID# _____

Requester Signature: _____ Account Number: _____

All vouchers for restricted categories must be authorized and signed below:

Pre-approval for purchase

Print Name: _____ Date: _____

Dean / Director / AVP / VP / President

Signature: _____

Dean / Director / AVP / VP / President

Campus Store Employee

Print Name: _____ Date: _____

Signature: _____