UNI Bookstore Department Charge

Date: ________________

Department: ____________________________________________ Authorized by: ____________________________

- Gen Fund/Aux #  - Account #: ___________... XXXXX. __________... 000. __________
- FDN # (taxed)

Name of person picking up: ______________________________________________________________

Amount (attach receipt) $ ________________ Receipt Number: ____________________________

Check which best describes purpose of supplies being purchased as a business purpose

- Office Supplies - 62010
- Instruction Supplies - 62020
- Project Supplies - 62030
- Lab Supplies - 62100
- Uniforms - 62700
- Postage – 63010 (non stamps)
- Prize/Gifts - 66040 (see policy for guidelines)
- Other

Provide object code

Explain Business Purpose: ______________________________________________________________

Customer Name (please print clearly) _____________________________________________

(Customer and Authorizer should be different people)

Customer Signature

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